

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective July 1, 2004

HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
A0021	Outside state ambulance serv	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0080	Noninterest escort in non er	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0090	Interest escort in non er	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0100	Nonemergency transport taxi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0110	Nonemergency transport bus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0120	Noner transport mini-bus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0130	Noner transport wheelch van	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0140	Nonemergency transport air	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0160	Noner transport case worker	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0170	Transport parking fees/tolls	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0180	Noner transport lodgng recip	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0190	Noner transport meals recip	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0200	Noner transport lodgng escrt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0210	Noner transport meals escort	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0225	Neonatal emergency transport	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0380	Basic life support mileage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0382	Basic support routine suppl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0384	Bls defibrillation supplies	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0390	Advanced life support mileag	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0392	Als defibrillation supplies	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0394	Als IV drug therapy supplies	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0396	Als esophageal intub suppl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0398	Als routine disposble suppl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0420	Ambulance waiting 1/2 hr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0422	Ambulance 02 life sustaining	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0424	Extra ambulance attendant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0425	Ground mileage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0426	Als 1	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0427	ALS1-emergency	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0428	bls	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0429	BLS-emergency	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0430	Fixed wing air transport	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0431	Rotary wing air transport	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0432	PI volunteer ambulance co	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A0433	als 2	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0434	Specialty care transport	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0435	Fixed wing air mileage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A0436	Rotary wing air mileage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
A0800	Amb trans 7pm-7am	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A0888	Noncovered ambulance mileage	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A0999	Unlisted ambulance service	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4206	1 CC sterile syringe&needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4207	2 CC sterile syringe&needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4208	3 CC sterile syringe&needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4209	5+ CC sterile syringe&needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4210	Nonneedle injection device	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4211	Supp for self-adm injections	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4212	Non coring needle or stylet	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4213	20+ CC syringe only	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4215	Sterile needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4216	Sterile water/saline, 10 ml	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4217	Sterile water/saline, 500 ml	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4220	Infusion pump refill kit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4221	Maint drug infus cath per wk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4222	Drug infusion pump supplies	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4230	Infus insulin pump non needl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4231	Infusion insulin pump needle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4232	Syringe w/needle insulin 3cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4244	Alcohol or peroxide per pint	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4245	Alcohol wipes per box	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4246	Betadine/phisohex solution	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4247	Betadine/iodine swabs/wipes	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4248	Chlorhexidine antisept	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4250	Urine reagent strips/tablets	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4253	Blood glucose/reagent strips	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4254	Battery for glucose monitor	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4255	Glucose monitor platforms	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4256	Calibrator solution/chips	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4257	Replace Lensshield Cartridge	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4258	Lancet device each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4259	Lancets per box	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4260	Levonorgestrel implant	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4261	Cervical cap contraceptive	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4262	Temporary tear duct plug	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4263	Permanent tear duct plug	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4265	Paraffin	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B

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CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
A4266	Diaphragm	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4267	Male condom	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4268	Female condom	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4269	Spermicide	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4270	Disposable endoscope sheath	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4280	Brst prsths adhsv attchmnt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4281	Replacement breastpump tube	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4282	Replacement breastpump adpt	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4283	Replacement breastpump cap	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4284	Replcmnt breast pump shield	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4285	Replcmnt breast pump bottle	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4286	Replcmnt breastpump lok ring	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4290	Sacral nerve stim test lead	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4300	Cath impl vasc access portal	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4301	Implantable access syst perc	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4305	Drug delivery system >=50 ML	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4306	Drug delivery system <=5 ML	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4310	Insert tray w/o bag/cath	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4311	Catheter w/o bag 2-way latex	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4312	Cath w/o bag 2-way silicone	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4313	Catheter w/bag 3-way	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4314	Cath w/drainage 2-way latex	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4315	Cath w/drainage 2-way silcne	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4316	Cath w/drainage 3-way	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4320	Irrigation tray	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4321	Cath therapeutic irrig agent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4322	Irrigation syringe	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4324	Male ext cath w/adh coating	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4325	Male ext cath w/adh strip	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4326	Male external catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4327	Fem urinary collect dev cup	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4328	Fem urinary collect pouch	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4330	Stool collection pouch	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4331	Extension drainage tubing	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4332	Lubricant for cath insertion	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4333	Urinary cath anchor device	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4334	Urinary cath leg strap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4335	Incontinence supply	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B

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A4338	Indwelling catheter latex	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4340	Indwelling catheter special	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4344	Cath indw foley 2 way silcn	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4346	Cath indw foley 3 way	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4347	Male external catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4348	Male ext cath extended wear	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4351	Straight tip urine catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4352	Coude tip urinary catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4353	Intermittent urinary cath	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4354	Cath insertion tray w/bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4355	Bladder irrigation tubing	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4356	Ext ureth clmp or compr dvc	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4357	Bedside drainage bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4358	Urinary leg or abdomen bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4359	Urinary suspensory w/o leg b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4361	Ostomy face plate	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4362	Solid skin barrier	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4364	Adhesive, liquid or equal	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4365	Adhesive remover wipes	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4366	Ostomy vent	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4367	Ostomy belt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4368	Ostomy filter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4369	Skin barrier liquid per oz	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4371	Skin barrier powder per oz	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4372	Skin barrier solid 4x4 equiv	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4373	Skin barrier with flange	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4375	Drainable plastic pch w fcpl	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4376	Drainable rubber pch w fcplt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4377	Drainable plstic pch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4378	Drainable rubber pch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4379	Urinary plastic pouch w fcpl	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4380	Urinary rubber pouch w fcplt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4381	Urinary plastic pouch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4382	Urinary hvy plstc pch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4383	Urinary rubber pouch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4384	Ostomy faceplt/silicone ring	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4385	Ost skn barrier sld ext wear	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4387	Ost clsd pouch w att st barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B

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A4388	Drainable pch w ex wear barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4389	Drainable pch w st wear barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4390	Drainable pch ex wear convex	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4391	Urinary pouch w ex wear barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4392	Urinary pouch w st wear barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4393	Urine pch w ex wear bar conv	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4394	Ostomy pouch liq deodorant	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4395	Ostomy pouch solid deodorant	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4396	Peristomal hernia supprt blt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4397	Irrigation supply sleeve	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4398	Ostomy irrigation bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4399	Ostomy irrig cone/cath w brs	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4400	Ostomy irrigation set	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4402	Lubricant per ounce	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4404	Ostomy ring each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4405	Nonpectin based ostomy paste	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4406	Pectin based ostomy paste	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4407	Ext wear ost skn barr <=4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4408	Ext wear ost skn barr >4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4409	Ost skn barr w flng <=4 sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4410	Ost skn barr w flng >4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4413	2 pc drainable ost pouch	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4414	Ostomy sknbarr w flng <=4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4415	Ostomy skn barr w flng >4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4416	Ost pch clsd w barrier/fltr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4417	Ost pch w bar/bltinconv/fltr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4418	Ost pch clsd w/o bar w fltr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4419	Ost pch for bar w flange/flt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4420	Ost pch clsd for bar w lk fl	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4421	Ostomy supply misc	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4422	Ost pouch absorbent material	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4423	Ost pch for bar w lk fl/fltr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4424	Ost pch drain w bar & filter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4425	Ost pch drain for barrier fl	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4426	Ost pch drain 2 piece system	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4427	Ost pch drain/barr lk flng/f	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4428	Urine ost pouch w faucet/tap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4429	Urine ost pouch w bltinconv	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	

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CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
A4430	Ost urine pch w b/bltin conv	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4431	Ost pch urine w barrier/tapv	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4432	Os pch urine w bar/fange/tap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4433	Urine ost pch bar w lock fln	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4434	Ost pch urine w lock flng/ft	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4450	Non-waterproof tape	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4452	Waterproof tape	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4455	Adhesive remover per ounce	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4458	Reusable enema bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4462	Abdmnl drssng holder/binder	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4465	Non-elastic extremity binder	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4470	Gravlee jet washer	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4480	Vabra aspirator	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4481	Tracheostoma filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4483	Moisture exchanger	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4490	Above knee surgical stocking	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4495	Thigh length surg stocking	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4500	Below knee surgical stocking	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4510	Full length surg stocking	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4521	Adult size diaper sm each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4522	Adult size diaper med each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4523	Adult size diaper lg each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4524	Adult size diaper xl each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4525	Adult size brief sm each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4526	Adult size brief med each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4527	Adult size brief lg each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4528	Adult size brief xl each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4529	Child size diaper sm/med ea	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4530	Child size diaper lg each	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4531	Child size brief sm/med each	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4532	Child size brief lg each	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4533	Youth size diaper each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4534	Youth size brief each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4535	Disp incont liner/shield ea	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4536	Prot underwr wshbl any sz ea	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4537	Under pad reusable any sz ea	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4538	Diaper sv ea reusable diaper	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4550	Surgical trays	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	

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A4554	Disposable underpads	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4556	Electrodes, pair	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4557	Lead wires, pair	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4558	Conductive paste or gel	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4561	Pessary rubber, any type	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4562	Pessary, non rubber,any type	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4565	Slings	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4570	Splint	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4575	Hyperbaric o2 chamber disps	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4580	Cast supplies (plaster)	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4590	Special casting material	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4595	TENS suppl 2 lead per month	Contracted	Contracted	0	0%	0%	0%	9	9	9	9	9	9			C
A4606	Oxygen probe used w oximeter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4608	Transtracheal oxygen cath	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4609	Trach suction cath clsd sys	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4610	Trach sctn cath 72h clsdsys	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4611	Heavy duty battery	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4612	Battery cables	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4613	Battery charger	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4614	Hand-held PEFR meter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4615	Cannula nasal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4616	Tubing (oxygen) per foot	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4617	Mouth piece	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4618	Breathing circuits	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4619	Face tent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4620	Variable concentration mask	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4623	Tracheostomy inner cannula	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4624	Tracheal suction tube	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4625	Trach care kit for new trach	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4626	Tracheostomy cleaning brush	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4627	Spacer bag/reservoir	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4628	Oropharyngeal suction cath	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4629	Tracheostomy care kit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4630	Repl bat t.e.n.s. own by pt	Contracted	Contracted	0	0%	0%	0%	9	9	9	9	9	9			C
A4632	Infus pump rplcemnt battery	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4633	Uvl replacement bulb	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4634	Replacement bulb th lightbox	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4635	Underarm crutch pad	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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A4636	Handgrip for cane etc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4637	Repl tip cane/crutch/walker	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4638	Repl batt pulse gen sys	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4639	Infrared ht sys replcmnt pad	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4640	Alternating pressure pad	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4641	Diagnostic imaging agent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4642	Satumomab pendetide per dose	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4643	High dose contrast MRI	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4644	Contrast 100-199 MGs iodine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A4645	Contrast 200-299 MGs iodine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A4646	Contrast 300-399 MGs iodine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A4647	Supp- paramagnetic contr mat	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4649	Surgical supplies	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4651	Calibrated microcap tube	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4652	Microcapillary tube sealant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4653	PD catheter anchor belt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4656	Needle any size	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4657	Syringe w/wo needle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4660	Sphyg/bp app w cuff and stet	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4663	Dialysis blood pressure cuff	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4670	Automatic bp monitor, dial	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4671	Disposable cycler set	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4672	Drainage ext line, dialysis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4673	Ext line w easy lock connect	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4674	Chem/antisept solution, 8oz	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4680	Activated carbon filter, ea	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4690	Dialyzer, each	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4706	Bicarbonate conc sol per gal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4707	Bicarbonate conc pow per pac	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4708	Acetate conc sol per gallon	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4709	Acid conc sol per gallon	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4714	Treated water per gallon	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4719	"Y set" tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4720	Dialysat sol fld vol > 249cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4721	Dialysat sol fld vol > 999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4722	Dialys sol fld vol > 1999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4723	Dialys sol fld vol > 2999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4724	Dialys sol fld vol > 3999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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A4725	Dialys sol fld vol > 4999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4726	Dialys sol fld vol > 5999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4728	Dialysate solution, non-dex	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4730	Fistula cannulation set, ea	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4736	Topical anesthetic, per gram	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4737	Inj anesthetic per 10 ml	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4740	Shunt accessory	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4750	Art or venous blood tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4755	Comb art/venous blood tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4760	Dialysate sol test kit, each	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4765	Dialysate conc pow per pack	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4766	Dialysate conc sol add 10 ml	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4770	Blood collection tube/vacuum	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4771	Serum clotting time tube	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4772	Blood glucose test strips	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4773	Occult blood test strips	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4774	Ammonia test strips	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4802	Protamine sulfate per 50 mg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4860	Disposable catheter tips	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4870	Plumb/elec wk hm hemo equip	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4890	Repair/maint cont hemo equip	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
A4911	Drain bag/bottle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4913	Misc dialysis supplies noc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4918	Venous pressure clamp	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4927	Non-sterile gloves	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4928	Surgical mask	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4929	Tourniquet for dialysis, ea	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A4930	Sterile, gloves per pair	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A4931	Reusable oral thermometer	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A4932	Reusable rectal thermometer	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A5051	Pouch clsd w barr attached	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5052	Clsd ostomy pouch w/o barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5053	Clsd ostomy pouch faceplate	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5054	Clsd ostomy pouch w/flange	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5055	Stoma cap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5061	Pouch drainable w barrier at	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5062	Drnble ostomy pouch w/o barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5063	Drain ostomy pouch w/flange	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
A5071	Urinary pouch w/barrier	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5072	Urinary pouch w/o barrier	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5073	Urinary pouch on barr w/flng	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5081	Continent stoma plug	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5082	Continent stoma catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5093	Ostomy accessory convex inse	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5102	Bedside drain btl w/wo tube	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5105	Urinary suspensory	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5112	Urinary leg bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5113	Latex leg strap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5114	Foam/fabric leg strap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5119	Skin barrier wipes box pr 50	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5121	Solid skin barrier 6x6	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5122	Solid skin barrier 8x8	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5126	Disk/foam pad +or- adhesive	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5131	Appliance cleaner	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A5200	Percutaneous catheter anchor	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5500	Diab shoe for density insert	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5501	Diabetic custom molded shoe	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5503	Diabetic shoe w/roller/rockr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5504	Diabetic shoe with wedge	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5505	Diab shoe w/metatarsal bar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5506	Diabetic shoe w/off set heel	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5507	Modification diabetic shoe	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5508	Diabetic deluxe shoe	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5509	Direct heat form shoe insert	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5510	Compression form shoe insert	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A5511	Custom fab molded shoe inser	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6000	Wound warming wound cover	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6010	Collagen based wound filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6011	Collagen gel/paste wound fil	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6021	Collagen dressing <=16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6022	Collagen drsg>6<=48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6023	Collagen dressing >48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6024	Collagen dsq wound filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6025	Silicone gel sheet, each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6154	Wound pouch each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6196	Alginate dressing <=16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
A6197	Alginate drsg >16 <=48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6198	alginate dressing > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6199	Alginate drsg wound filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6200	Compos drsg <=16 no border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6201	Compos drsg >16<=48 no bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6202	Compos drsg >48 no border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6203	Composite drsg <= 16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6204	Composite drsg >16<=48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6205	Composite drsg > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6206	Contact layer <= 16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6207	Contact layer >16<= 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6208	Contact layer > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6209	Foam drsg <=16 sq in w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6210	Foam drg >16<=48 sq in w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6211	Foam drg > 48 sq in w/o brdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6212	Foam drg <=16 sq in w/border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6213	Foam drg >16<=48 sq in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6214	Foam drg > 48 sq in w/border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6215	Foam dressing wound filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6216	Non-sterile gauze<=16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6217	Non-sterile gauze>16<=48 sq	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6218	Non-sterile gauze > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6219	Gauze <= 16 sq in w/border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6220	Gauze >16 <=48 sq in w/bordr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6221	Gauze > 48 sq in w/border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6222	Gauze <=16 in no w/sal w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6223	Gauze >16<=48 no w/sal w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6224	Gauze > 48 in no w/sal w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6228	Gauze <= 16 sq in water/sal	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6229	Gauze >16<=48 sq in watr/sal	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6230	Gauze > 48 sq in water/salne	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6231	Hydrogel dsg<=16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6232	Hydrogel dsg>16<=48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6233	Hydrogel dressing >48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6234	Hydrocolld drg <=16 w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6235	Hydrocolld drg >16<=48 w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6236	Hydrocolld drg > 48 in w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6237	Hydrocolld drg <=16 in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B

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CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
A6238	Hydrocolld drg >16<=48 w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6239	Hydrocolld drg > 48 in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6240	Hydrocolld drg filler paste	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6241	Hydrocolloid drg filler dry	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6242	Hydrogel drg <=16 in w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6243	Hydrogel drg >16<=48 w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6244	Hydrogel drg >48 in w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6245	Hydrogel drg <= 16 in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6246	Hydrogel drg >16<=48 in w/b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6247	Hydrogel drg > 48 sq in w/b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6248	Hydrogel drsg gel filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6250	Skin seal protect moisturizr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6251	Absorpt drg <=16 sq in w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6252	Absorpt drg >16 <=48 w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6253	Absorpt drg > 48 sq in w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6254	Absorpt drg <=16 sq in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6255	Absorpt drg >16<=48 in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6256	Absorpt drg > 48 sq in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6257	Transparent film <= 16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6258	Transparent film >16<=48 in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6259	Transparent film > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6260	Wound cleanser any type/size	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6261	Wound filler gel/paste /oz	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6262	Wound filler dry form / gram	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6266	Impreg gauze no h20/sal/yard	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6402	Sterile gauze <= 16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6403	Sterile gauze>16 <= 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6404	Sterile gauze > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6407	Packing strips, non-impreg	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6410	Sterile eye pad	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6411	Non-sterile eye pad	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6412	Occlusive eye patch	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6441	Pad band w>=3" <5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6442	Conform band n/s w<3"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6443	Conform band n/s w>=3"<5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6444	Conform band n/s w>=5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6445	Conform band s w <3"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6446	Conform band s w>=3" <5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	

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CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
A6447	Conform band s w >=5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6448	Lt compres band <3"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6449	Lt compres band >=3" <5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6450	Lt compres band >=5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6451	Mod compres band w>=3"<5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6452	High compres band w>=3"<5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6453	Self-adher band w <3"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6454	Self-adher band w>=3" <5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6455	Self-adher band >=5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6456	Zinc paste band w >=3"<5"/yd	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
A6501	Compres burngarment bodysuit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6502	Compres burngarment chinstrp	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6503	Compres burngarment facehood	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6504	Cmprsburngarment glove-wrist	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6505	Cmprsburngarment glove-elbow	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6506	Cmprsburngrmnt glove-axilla	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6507	Cmprsburngarment foot-knee	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6508	Cmprsburngarment foot-thigh	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6509	Compres burn garment jacket	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6510	Compres burn garment leotard	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6511	Compres burn garment panty	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6512	Compres burn garment, noc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6550	Neg pres wound ther drsg set	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A6551	Neg press wound ther canistr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7000	Disposable canister for pump	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7001	Nondisposable pump canister	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7002	Tubing used w suction pump	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7003	Nebulizer administration set	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7004	Disposable nebulizer sml vol	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7005	Nondisposable nebulizer set	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7006	Filtered nebulizer admin set	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7007	Lg vol nebulizer disposable	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7008	Disposable nebulizer prefill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7009	Nebulizer reservoir bottle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7010	Disposable corrugated tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7011	Nondispos corrugated tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7012	Nebulizer water collec devic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7013	Disposable compressor filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
A7014	Compressor nondispos filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7015	Aerosol mask used w nebulize	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7016	Nebulizer dome & mouthpiece	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7017	Nebulizer not used w oxygen	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7018	Water distilled w/nebulizer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7025	Replace chest compress vest	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A7026	Replace chst cmprss sys hose	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A7030	CPAP full face mask	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7031	Replacement facemask interfa	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7032	Replacement nasal cushion	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7033	Replacement nasal pillows	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7034	Nasal application device	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7035	Pos airway press headgear	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7036	Pos airway press chinstrap	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7037	Pos airway pressure tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7038	Pos airway pressure filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7039	Filter, non disposable w pap	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7042	Implanted pleural catheter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7043	Vacuum drainagebottle/tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7044	PAP oral interface	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A7046	Repl water chamber, PAP dev	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7501	Tracheostoma valve w diaphra	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7502	Replacement diaphragm/fplate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7503	HMES filter holder or cap	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7504	Tracheostoma HMES filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7505	HMES or trach valve housing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7506	HMES/trachvalve adhesivedisk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7507	Integrated filter & holder	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7508	Housing & Integrated Adhesiv	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7509	Heat & moisture exchange sys	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7520	Trach/laryn tube non-cuffed	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7521	Trach/laryn tube cuffed	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7522	Trach/laryn tube stainless	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7523	Tracheostomy shower protect	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7524	Tracheostoma stent/stud/bttn	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7525	Tracheostomy mask	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A7526	Tracheostomy tube collar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9150	Misc/exper non-prescript dru	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
A9270	Non-covered item or service	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A9280	Alert device, noc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9300	Exercise equipment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A9500	Technetium TC 99m sestamibi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9502	Technetium TC99m tetrofosmin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A9503	Technetium TC 99m medronate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A9504	Technetium tc 99m apcitide	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9505	Thallous chloride TL 201/mci	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A9507	Indium/111 capromab pendetid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9508	Iobenguane sulfate I-131	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A9510	Technetium TC99m Disofenin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A9511	Technetium TC 99m depreotide	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9512	Technetiumtc99mpertechetate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9513	Technetium tc-99m mebrofenin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9514	Technetiumtc99mpyrophosphate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9515	Technetium tc-99m pentetate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9516	I-123 sodium iodide capsule	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9517	I-131 sodium iodide capsule	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9519	Technetiumtc-99mmacroag albu	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9520	Technetiumtc-99m sulfur clld	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9521	Technetiumtc-99m exametazine	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9522	Indium111ibritumomabtixetan	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9523	Yttrium90ibritumomabtixetan	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9524	Iodinated I-131 serumalbumin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9525	Low/iso-osmolar contrast mat	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
A9526	Ammonia N-13, per dose	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9528	Dx I131 so iodide cap millic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9529	Dx I131 so iodide sol millic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9530	Th I131 so iodide sol millic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9531	Dx I131 so iodide microcurie	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9532	I-125 serum albumin micro	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9533	I-131 tositumomab diagnostic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9534	I-131 tositumomab therapeut	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9600	Strontium-89 chloride	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9605	Samarium sm153 leixidronamm	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
A9699	Noc therapeutic radiopharm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9700	Echocardiography Contrast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
A9900	Supply/accessory/service	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI			
A9901	Delivery/set up/dispensing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
A9999	DME supply or accessory, nos	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
B4034	Enter feed supkit syr by day	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4035	Enteral feed supp pump per d	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4036	Enteral feed sup kit grav by	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4081	Enteral ng tubing w/ stylet	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4082	Enteral ng tubing w/o stylet	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4083	Enteral stomach tube levine	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4086	Gastrostomy/jejunostomy tube	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
B4100	Food thickener oral	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
B4150	Enteral formulae category i	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4151	Enteral formulae cat1natural	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4152	Enteral formulae category ii	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4153	Enteral formulae categoryIII	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4154	Enteral formulae category IV	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4155	Enteral formulae category v	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4156	Enteral formulae category vi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4164	Parenteral 50% dextrose solu	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4168	Parenteral sol amino acid 3.	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4172	Parenteral sol amino acid 5.	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4176	Parenteral sol amino acid 7-	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4178	Parenteral sol amino acid >	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4180	Parenteral sol carb > 50%	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4184	Parenteral sol lipids 10%	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4186	Parenteral sol lipids 20%	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4189	Parenteral sol amino acid &	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4193	Parenteral sol 52-73 gm prot	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4197	Parenteral sol 74-100 gm pro	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4199	Parenteral sol > 100gm prote	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4216	Parenteral nutrition additiv	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4220	Parenteral supply kit premix	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4222	Parenteral supply kit homemi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B4224	Parenteral administration ki	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B5000	Parenteral sol renal-amirosoy	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B5100	Parenteral sol hepatic-fream	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B5200	Parenteral sol stres-brnch c	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B9000	Enter infusion pump w/o alrm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
B9002	Enteral infusion pump w/ ala	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
B9004	Parenteral infus pump portab	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
B9006	Parenteral infus pump statio	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
B9998	Enteral supp not otherwise c	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
B9999	Parenteral supp not othrws c	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
C1079	CO 57/58 per 0.5 uCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1080	I-131 tositumomab, dx	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1081	I-131 tositumomab, tx	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1082	In-111 ibritumomab tiuxetan	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1083	Yttrium 90 ibritumomab tiuxe	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1088	LASER OPTIC TR Sys	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1091	IN111 oxyquinoline,per0.5mCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1092	IN 111 pentetate per 0.5 mCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1122	Tc 99M ARCITUMOMAB PER VIA	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1178	BUSULFAN IV, 6 Mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1200	TC 99M Sodium Glucoheptonat	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1201	TC 99M SUCCIMER, PER Vial	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1300	HYPERBARIC Oxygen	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1305	Apligraf	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1713	Anchor/screw bn/bn,tis/bn	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1714	Cath, trans atherectomy, dir	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1715	Brachytherapy needle	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1716	Brachytx seed, Gold 198	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1717	Brachytx seed, HDR Ir-192	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1718	Brachytx seed, Iodine 125	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1719	Brachytx seed,Non-HDR Ir-192	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1720	Brachytx seed, Palladium 103	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1721	AICD, dual chamber	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1722	AICD, single chamber	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1724	Cath, trans atherec,rotation	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1725	Cath, translumin non-laser	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1726	Cath, bal dil, non-vascular	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1727	Cath, bal tis dis, non-vas	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1728	Cath, brachytx seed adm	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1729	Cath, drainage	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1730	Cath, EP, 19 or few elect	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1731	Cath, EP, 20 or more elec	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1732	Cath, EP, diag/abl, 3D/vect	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1733	Cath, EP, othr than cool-tip	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
C1750	Cath, hemodialysis,long-term	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1751	Cath, inf, per/cent/midline	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1752	Cath,hemodialysis,short-term	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1753	Cath, intravas ultrasound	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1754	Catheter, intradiscal	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1755	Catheter, intraspinal	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1756	Cath, pacing, transesoph	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1757	Cath, thrombectomy/embolect	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1758	Catheter, ureteral	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1759	Cath, intra echocardiography	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1760	Closure dev, vasc	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1762	Conn tiss, human(inc fascia)	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1763	Conn tiss, non-human	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1764	Event recorder, cardiac	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1765	Adhesion barrier	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1766	Intro/sheath, strble,non-peel	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1767	Generator, neurostim, imp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1768	Graft, vascular	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1769	Guide wire	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1770	Imaging coil, MR, insertable	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1771	Rep dev, urinary, w/sling	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1772	Infusion pump, programmable	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1773	Ret dev, insertable	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1775	FDG, per dose (4-40 mCi/ml)	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
C1776	Joint device (implantable)	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1777	Lead, AICD, endo single coil	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1778	Lead, neurostimulator	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1779	Lead, pmkr, transvenous VDD	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1780	Lens, intraocular (new tech)	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1781	Mesh (implantable)	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1782	Morcellator	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1783	Ocular imp, aqueous drain de	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1784	Ocular dev, intraop, det ret	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1785	Pmkr, dual, rate-resp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1786	Pmkr, single, rate-resp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1787	Patient progr, neurostim	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1788	Port, indwelling, imp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1789	Prosthesis, breast, imp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
C1813	Prosthesis, penile, inflatab	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1814	Retinal tamp, silicone oil	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1815	Pros, urinary sph, imp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1816	Receiver/transmitter, neuro	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1817	Septal defect imp sys	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1818	Integrated keratoprosthesis	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1819	Tissue localization-excision	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1874	Stent, coated/cov w/del sys	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1875	Stent, coated/cov w/o del sy	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1876	Stent, non-coa/non-cov w/del	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1877	Stent, non-coat/cov w/o del	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1878	Matrl for vocal cord	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1879	Tissue marker, implantable	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1880	Vena cava filter	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1881	Dialysis access system	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1882	AICD, other than sing/dual	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1883	Adapt/ext, pacing/neuro lead	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1884	Embolization protect syst	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1885	Cath, translumin angio laser	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1887	Catheter, guiding	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1888	Endovas non-cardiac abl cath	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C1891	Infusion pump,non-prog, perm	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1892	Intro/sheath, fixed, peel-away	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1893	Intro/sheath, fixed, non-peel	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1894	Intro/sheath, non-laser	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1895	Lead, AICD, endo dual coil	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1896	Lead, AICD, non sing/dual	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1897	Lead, neurostim test kit	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1898	Lead, pmkr, other than trans	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1899	Lead, pmkr/AICD combination	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C1900	Lead, coronary venous	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C2614	Probe, perc lumb disc	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
C2615	Sealant, pulmonary, liquid	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C2616	Brachytx seed, Yttrium-90	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O
C2617	Stent, non-cor, tem w/o del	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C2618	Probe, cryoablation	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C2619	Pmkr, dual, non rate-resp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
C2620	Pmkr, single, non rate-resp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI			
C2621	Pmkr, other than sing/dual	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2622	Prosthesis, penile, non-inf	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2625	Stent, non-cor, tem w/del sy	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2626	Infusion pump, non-prog,temp	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2627	Cath, suprapubic/cystoscopic	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2628	Catheter, occlusion	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2629	Intro/sheath, laser	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2630	Cath, EP, cool-tip	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2631	Rep dev, urinary, w/o sling	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C2632	Brachytx sol, I-125, per mCi	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X			
C2633	Brachytx source, Cesium-131	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C8900	MRA w/cont, abd	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8901	MRA w/o cont, abd	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8902	MRA w/o fol w/cont, abd	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8903	MRI w/cont, breast, uni	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8904	MRI w/o cont, breast, uni	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8905	MRI w/o fol w/cont, brst, un	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8906	MRI w/cont, breast, bi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8907	MRI w/o cont, breast, bi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8908	MRI w/o fol w/cont, breast,	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8909	MRA w/cont, chest	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8910	MRA w/o cont, chest	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8911	MRA w/o fol w/cont, chest	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8912	MRA w/cont, lwr ext	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8913	MRA w/o cont, lwr ext	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8914	MRA w/o fol w/cont, lwr ext	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C8918	MRA w/cont, pelvis	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C8919	MRA w/o cont, pelvis	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C8920	MRA w/o fol w/cont, pelvis	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O			
C9000	Na chromateCr51, per 0.25mCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C9003	Palivizumab, per 50 mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C9007	Baclofen Intrathecal kit-1am	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C9008	Baclofen Refill Kit-500mcg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C9009	Baclofen Refill Kit-20mcg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C9013	Co 57 cobaltous chloride	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C9102	51 Na Chromate, 50mCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C9103	Na Iothalamate I-125, 10 uCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			
C9105	Hep B imm glob, per 1 ml	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O			

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HPCPS
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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
C9109	Tirofiban hcl, 6.25 mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9112	Perflutren lipid micro, 2ml	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9113	Inj pantoprazole sodium, via	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9117	Y-90 ibritumomab tiuxetan	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C9118	IN-111 ibritumomab tiuxetan	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C9121	Injection, argatroban	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9123	Transcyte, per 247 sq cm	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9124	Injection, daptomycin	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9125	Injection, risperidone	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9200	Orcel, per 36 cm2	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9201	Dermagraft, per 37.5 sq cm	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9202	Human albumin micro	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9203	Perflexane lipid micro	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9205	Oxaliplatin	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9207	Injection, bortezomib	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9208	Injection, agalsidase beta	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9209	Injection, laronidase	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9210	Injection, palonosetron HCl	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9211	Inj, alefacept, IV	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9212	Inj, alefacept, IM	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0		O	
C9400	Thallous chloride, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9402	Th I131 so iodide cap, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9403	Dx I131 so iodide cap, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9404	Dx I131 so iodide sol, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9405	Th I131 so iodide sol, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9408	FDG, brand, per dose	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9410	Dexrazoxane HCl inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9411	Pamidronate disodium, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9412	Ganciclovir implant, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9413	Sodium hyaluronate inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9414	Etoposide oral, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9415	Doxorubicin hcl chemo, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9416	Bcg live intravesical, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9417	Bleomycin sulfate inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9418	Cisplatin inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9419	Inj cladribine, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9420	Cyclophosphamide inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9421	Cyclophosphamide lyo, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	

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HCPCS
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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS												
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	
C9422	Cytarabine hcl inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9423	Dacarbazine inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9424	Daunorubicin, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9425	Etoposide inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9426	Floxuridine inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9427	Ifosfomide inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9428	Mesna injection, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9429	Idarubicin hcl inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9430	Leuprolide acetate inj, bran	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9431	Paclitaxel inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9432	Mitomycin inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9433	Thiotepa inj, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9434	Gallium ga 67, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9438	Cyclosporine oral, brand	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9701	Stretta System	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9703	Bard Endoscopic Suturing Sys	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0			O	
C9704	Inj inert subs upper GI	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O	
C9712	Insert pH capsule, GERD	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O	
C9713	Non-contact laser vap prosta	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X	
C9714	Breast inters rad tx, immed	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X	
C9715	Breast inters rad tx, delay	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X	
D0120	Periodic oral evaluation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D0140	Limit oral eval problm focus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D0150	Comprehensve oral evaluation	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D0160	Extensv oral eval prob focus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D0170	Re-eval,est pt,problem focus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D0180	Comp periodontal evaluation	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X	
D0210	Intraor complete film series	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D0220	Intraoral periapical first f	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D0230	Intraoral periapical ea add	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D0240	Intraoral occlusal film	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D0250	Extraoral first film	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D0260	Extraoral ea additional film	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D0270	Dental bitewing single film	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D0272	Dental bitewings two films	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D0274	Dental bitewings four films	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D0277	Vert bitewings-sev to eight	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D0290	Dental film skull/facial bon	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	

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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
D0310	Dental saliography	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0320	Dental tmj arthrogram incl i	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0321	Dental other tmj films	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0322	Dental tomographic survey	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0330	Dental panoramic film	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0340	Dental cephalometric film	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0350	Oral/facial images	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0415	Bacteriologic study	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0425	Caries susceptibility test	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0460	Pulp vitality test	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D0470	Diagnostic casts	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0472	Gross exam, prep & report	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0473	Micro exam, prep & report	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0474	Micro w exam of surg margins	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0480	Cytopath smear prep & report	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D0502	Other oral pathology procedu	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D0999	Unspecified diagnostic proce	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D1110	Dental prophylaxis adult	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1120	Dental prophylaxis child	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1201	Topical fluor w prophy child	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1203	Topical fluor w/o prophy chi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1204	Topical fluor w/o prophy adu	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1205	Topical fluoride w/ prophy a	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1310	Nutri counsel-control caries	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1320	Tobacco counseling	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D1330	Oral hygiene instruction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1351	Dental sealant per tooth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D1510	Space maintainer fxd unilat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D1515	Fixed bilat space maintainer	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D1520	Remove unilat space maintain	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D1525	Remove bilat space maintain	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D1550	Recement space maintainer	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D2140	Amalgam one surface permanen	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2150	Amalgam two surfaces permane	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2160	Amalgam three surfaces perma	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2161	Amalgam 4 or > surfaces perm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2330	Resin one surface-anterior	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2331	Resin two surfaces-anterior	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
D2332	Resin three surfaces-anterio	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2335	Resin 4/> surf or w incis an	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2390	Ant resin-based cmpst crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2391	Post 1 srfc resinbased cmpst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2392	Post 2 srfc resinbased cmpst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2393	Post 3 srfc resinbased cmpst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2394	Post >=4srfc resinbase cmpst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2410	Dental gold foil one surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2420	Dental gold foil two surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2430	Dental gold foil three surfa	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2510	Dental inlay metallic 1 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2520	Dental inlay metallic 2 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2530	Dental inlay metl 3/more sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2542	Dental onlay metallic 2 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2543	Dental onlay metallic 3 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2544	Dental onlay metl 4/more sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2610	Inlay porcelain/ceramic 1 su	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2620	Inlay porcelain/ceramic 2 su	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2630	Dental onlay porc 3/more sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2642	Dental onlay porcelin 2 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2643	Dental onlay porcelin 3 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2644	Dental onlay porc 4/more sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2650	Inlay composite/resin one su	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2651	Inlay composite/resin two su	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2652	Dental inlay resin 3/mre sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2662	Dental onlay resin 2 surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2663	Dental onlay resin 3 surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2664	Dental onlay resin 4/mre sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2710	Crown resin laboratory	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2720	Crown resin w/ high noble me	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2721	Crown resin w/ base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2722	Crown resin w/ noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2740	Crown porcelain/ceramic subs	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2750	Crown porcelain w/ h noble m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2751	Crown porcelain fused base m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2752	Crown porcelain w/ noble met	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2780	Crown 3/4 cast hi noble met	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2781	Crown 3/4 cast base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

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D2782	Crown 3/4 cast noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2783	Crown 3/4 porcelain/ceramic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2790	Crown full cast high noble m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2791	Crown full cast base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2792	Crown full cast noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2799	Provisional crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2910	Dental recement inlay	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2920	Dental recement crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2930	Prefab stnlss steel crwn pri	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2931	Prefab stnlss steel crown pe	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2932	Prefabricated resin crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2933	Prefab stainless steel crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2940	Dental sedative filling	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2950	Core build-up incl any pins	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2951	Tooth pin retention	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2952	Post and core cast + crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2953	Each addtnl cast post	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2954	Prefab post/core + crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2955	Post removal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2957	Each addtnl prefab post	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2960	Laminate labial veneer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2961	Lab labial veneer resin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2962	Lab labial veneer porcelain	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2970	Temporary- fractured tooth	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D2980	Crown repair	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D2999	Dental unspec restorative pr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D3110	Pulp cap direct	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3120	Pulp cap indirect	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3220	Therapeutic pulpotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3221	Gross pulpal debridement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3230	Pulpal therapy anterior prim	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3240	Pulpal therapy posterior pri	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3310	Anterior	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3320	Root canal therapy 2 canals	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3330	Root canal therapy 3 canals	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3331	Non-surg tx root canal obs	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3332	Incomplete endodontic tx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3333	Internal root repair	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
D3346	Retreat root canal anterior	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3347	Retreat root canal bicuspid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3348	Retreat root canal molar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3351	Apexification/recalc initial	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3352	Apexification/recalc interim	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3353	Apexification/recalc final	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3410	Apicoect/perirad surg anter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3421	Root surgery bicuspid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3425	Root surgery molar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3426	Root surgery ea add root	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3430	Retrograde filling	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3450	Root amputation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3460	Endodontic endosseous implan	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D3470	Intentional replantation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3910	Isolation- tooth w rubb dam	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3920	Tooth splitting	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3950	Canal prep/fitting of dowel	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D3999	Endodontic procedure	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4210	Gingivectomy/plasty per quad	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4211	Gingivectomy/plasty per toot	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4240	Gingival flap proc w/ planin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4241	Gngvl flap w rootplan 1-3 th	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D4245	Apically positioned flap	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4249	Crown lengthen hard tissue	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4260	Osseous surgery per quadrant	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4261	Osseous surgl-3teethperquad	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D4263	Bone replce graft first site	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4264	Bone replce graft each add	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4265	Bio mtrls to aid soft/os reg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4266	Guided tiss regen resorbble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4267	Guided tiss regen nonresorb	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4268	Surgical revision procedure	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4270	Pedicle soft tissue graft pr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4271	Free soft tissue graft proc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4273	Subepithelial tissue graft	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4274	Distal/proximal wedge proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4275	Soft tissue allograft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4276	Con tissue w dble ped graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
D4320	Provision splnt intracoronal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4321	Provisional splint extracoro	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4341	Periodontal scaling & root	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4342	Periodontal scaling 1-3teeth	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D4355	Full mouth debridement	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4381	Localized chemo delivery	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D4910	Periodontal maint procedures	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4920	Unscheduled dressing change	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D4999	Unspecified periodontal proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5110	Dentures complete maxillary	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5120	Dentures complete mandible	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5130	Dentures immediat maxillary	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5140	Dentures immediat mandible	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5211	Dentures maxill part resin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5212	Dentures mand part resin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5213	Dentures maxill part metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5214	Dentures mandibl part metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5281	Removable partial denture	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5410	Dentures adjust cmplt maxil	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5411	Dentures adjust cmplt mand	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5421	Dentures adjust part maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5422	Dentures adjust part mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5510	Dentur repr broken compl bas	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5520	Replace denture teeth complt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5610	Dentures repair resin base	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5620	Rep part denture cast frame	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5630	Rep partial denture clasp	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5640	Replace part denture teeth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5650	Add tooth to partial denture	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5660	Add clasp to partial denture	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5670	Replc tth&acrlc on mtl frmwk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5671	Replc tth&acrlc mandibular	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5710	Dentures rebase cmplt maxil	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5711	Dentures rebase cmplt mand	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5720	Dentures rebase part maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5721	Dentures rebase part mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5730	Denture reln cmplt maxil ch	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5731	Denture reln cmplt mand chr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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D5740	Denture reln part maxil chr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5741	Denture reln part mand chr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5750	Denture reln cmplt max lab	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5751	Denture reln cmplt mand lab	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5760	Denture reln part maxil lab	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5761	Denture reln part mand lab	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5810	Denture interm cmplt maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5811	Denture interm cmplt mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5820	Denture interm part maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5821	Denture interm part mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5850	Denture tiss conditn maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5851	Denture tiss condtin mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5860	Overdenture complete	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5861	Overdenture partial	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5862	Precision attachment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5867	Replacement of precision att	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5875	Prosthesis modification	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5899	Removable prosthodontic proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5911	Facial moulage sectional	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D5912	Facial moulage complete	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
D5913	Nasal prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5914	Auricular prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5915	Orbital prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5916	Ocular prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5919	Facial prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5922	Nasal septal prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5923	Ocular prosthesis interim	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5924	Cranial prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5925	Facial augmentation implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5926	Replacement nasal prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5927	Auricular replacement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5928	Orbital replacement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5929	Facial replacement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5931	Surgical obturator	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5932	Postsurgical obturator	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5933	Refitting of obturator	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5934	Mandibular flange prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	
D5935	Mandibular denture prosth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N	

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
D5936	Temp obturator prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5937	Trismus appliance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5951	Feeding aid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D5952	Pediatric speech aid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5953	Adult speech aid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5954	Superimposed prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5955	Palatal lift prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5958	Intraoral con def inter plt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5959	Intraoral con def mod palat	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5960	Modify speech aid prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5982	Surgical stent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5983	Radiation applicator	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D5984	Radiation shield	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D5985	Radiation cone locator	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D5986	Fluoride applicator	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5987	Commissure splint	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D5988	Surgical splint	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D5999	Maxillofacial prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6010	Odontics endosteal implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6020	Odontics abutment placement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6040	Odontics eposteal implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6050	Odontics transosteal implnt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6053	Implnt/abtmnt spprt remv dnt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6054	Implnt/abtmnt spprt remvprtl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6055	Implant connecting bar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6056	Prefabricated abutment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6057	Custom abutment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6058	Abutment supported crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6059	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6060	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6061	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6062	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6063	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6064	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6065	Implant supported crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6066	Implant supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6067	Implant supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6068	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
D6069	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6070	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6071	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6072	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6073	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6074	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6075	Implant supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6076	Implant supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6077	Implant supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6078	Implnt/abut suprted fixd dent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6079	Implnt/abut suprted fixd dent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6080	Implant maintenance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6090	Repair implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6095	Odontics repr abutment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6100	Removal of implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6199	Implant procedure	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6210	Prosthodont high noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6211	Bridge base metal cast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6212	Bridge noble metal cast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6240	Bridge porcelain high noble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6241	Bridge porcelain base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6242	Bridge porcelain nobel metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6245	Bridge porcelain/ceramic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6250	Bridge resin w/high noble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6251	Bridge resin base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6252	Bridge resin w/noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6253	Provisional pontic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6545	Dental retainr cast metl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6548	Porcelain/ceramic retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6600	Porcelain/ceramic inlay 2srf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6601	Porc/ceram inlay >= 3 surfac	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6602	Cst hgh nble mtl inlay 2 srf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6603	Cst hgh nble mtl inlay >=3sr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6604	Cst bse mtl inlay 2 surfaces	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6605	Cst bse mtl inlay >= 3 surfa	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6606	Cast noble metal inlay 2 sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6607	Cst noble mtl inlay >=3 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6608	Onlay porc/crmc 2 surfaces	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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HPCPS		DOLLAR VALUE		MODIFIERS												LIC
CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
D6609	Onlay porc/crmc >=3 surfaces	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6610	Onlay cst hgh nbl mtl 2 srfc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6611	Onlay cst hgh nbl mtl >=3srf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6612	Onlay cst base mtl 2 surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6613	Onlay cst base mtl >=3 surfa	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6614	Onlay cst nbl mtl 2 surfaces	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6615	Onlay cst nbl mtl >=3 surfac	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6720	Retain crown resin w hi nble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6721	Crown resin w/base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6722	Crown resin w/noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6740	Crown porcelain/ceramic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6750	Crown porcelain high noble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6751	Crown porcelain base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6752	Crown porcelain noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6780	Crown 3/4 high noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6781	Crown 3/4 cast based metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6782	Crown 3/4 cast noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6783	Crown 3/4 porcelain/ceramic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6790	Crown full high noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6791	Crown full base metal cast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6792	Crown full noble metal cast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6793	Provisional retainer crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6920	Dental connector bar	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D6930	Dental recement bridge	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6940	Stress breaker	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6950	Precision attachment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6970	Post & core plus retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6971	Cast post bridge retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6972	Prefab post & core plus reta	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6973	Core build up for retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6975	Coping metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6976	Each addtl cast post	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6977	Each addtl prefab post	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6980	Bridge repair	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D6985	Pediatric partial denture fx	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D6999	Fixed prosthodontic proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7111	Coronal remnants deciduous t	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7140	Extraction erupted tooth/exr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
D7210	Rem imp tooth w mucoper flp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D7220	Impact tooth remov soft tiss	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D7230	Impact tooth remov part bony	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D7240	Impact tooth remov comp bony	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D7241	Impact tooth rem bony w/comp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D7250	Tooth root removal	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D7260	Oral antral fistula closure	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D7261	Primary closure sinus perf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7270	Tooth reimplantation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7272	Tooth transplantation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7280	Exposure impact tooth orthod	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7281	Exposure tooth aid eruption	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7282	Mobilize erupted/malpos toot	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7285	Biopsy of oral tissue hard	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7286	Biopsy of oral tissue soft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7287	Cytology sample collection	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7290	Repositioning of teeth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7291	Transseptal fiberotomy	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D7310	Alveoplasty w/ extraction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7320	Alveoplasty w/o extraction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7340	Vestibuloplasty ridge extens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7350	Vestibuloplasty exten graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7410	Rad exc lesion up to 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7411	Excision benign lesion>1.25c	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D7412	Excision benign lesion compl	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D7413	Excision malig lesion<=1.25c	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D7414	Excision malig lesion>1.25cm	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D7415	Excision malig les complicat	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D7440	Malig tumor exc to 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7441	Malig tumor > 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7450	Rem odontogen cyst to 1.25cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7451	Rem odontogen cyst > 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7460	Rem nonodonto cyst to 1.25cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7461	Rem nonodonto cyst > 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7465	Lesion destruction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7471	Rem exostosis any site	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7472	Removal of torus palatinus	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D7473	Remove torus mandibularis	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
D7485	Surg reduct osseoustuberosit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
D7490	Mandible resection	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7510	I&d abscc intraoral soft tiss	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7520	I&d abscess extraoral	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7530	Removal fb skin/areolar tiss	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7540	Removal of fb reaction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7550	Removal of sloughed off bone	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7560	Maxillary sinusotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7610	Maxilla open reduct simple	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7620	Clsd reduct simpl maxilla fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7630	Open red simpl mandible fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7640	Clsd red simpl mandible fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7650	Open red simp malar/zygom fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7660	Clsd red simp malar/zygom fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7670	Closed rductn splint alveolus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7671	Alveolus open reduction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7680	Reduct simple facial bone fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7710	Maxilla open reduct compound	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7720	Clsd reduct compd maxilla fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7730	Open reduct compd mandble fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7740	Clsd reduct compd mandble fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7750	Open red comp malar/zygma fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7760	Clsd red comp malar/zygma fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7770	Open reduc compd alveolus fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7771	Alveolus clsd reduc stblz te	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7780	Reduct compnd facial bone fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7810	Tmj open reduct-dislocation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7820	Closed tmp manipulation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7830	Tmj manipulation under anest	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7840	Removal of tmj condyle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7850	Tmj meniscectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7852	Tmj repair of joint disc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7854	Tmj excisn of joint membrane	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7856	Tmj cutting of a muscle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7858	Tmj reconstruction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7860	Tmj cutting into joint	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7865	Tmj reshaping components	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D7870	Tmj aspiration joint fluid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											LIC REQ	
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE			
															FSI		
D7871	Lysis + lavage w catheters	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7872	Tmj diagnostic arthroscopy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7873	Tmj arthroscopy lysis adhesn	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7874	Tmj arthroscopy disc reposit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7875	Tmj arthroscopy synovectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7876	Tmj arthroscopy discectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7877	Tmj arthroscopy debridement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7880	Occlusal orthotic appliance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7899	Tmj unspecified therapy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7910	Dent sutur recent wnd to 5cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7911	Dental suture wound to 5 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7912	Suture complicate wnd > 5 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7920	Dental skin graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7940	Reshaping bone orthognathic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
D7941	Bone cutting ramus closed	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7943	Cutting ramus open w/graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7944	Bone cutting segmented	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7945	Bone cutting body mandible	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7946	Reconstruction maxilla total	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7947	Reconstruct maxilla segment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7948	Reconstruct midface no graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7949	Reconstruct midface w/graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7950	Mandible graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7955	Repair maxillofacial defects	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7960	Frenulectomy/frenulotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7970	Excision hyperplastic tissue	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7971	Excision pericoronal gingiva	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7972	Surg redct fibrous tuberosit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
D7980	Sialolithotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7981	Excision of salivary gland	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7982	Sialodochoplasty	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7983	Closure of salivary fistula	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7990	Emergency tracheotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7991	Dental coronoidectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7995	Synthetic graft facial bones	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7996	Implant mandible for augment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7997	Appliance removal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D7999	Oral surgery procedure	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		

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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
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D8010	Limited dental tx primary	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8020	Limited dental tx transition	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8030	Limited dental tx adolescent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8040	Limited dental tx adult	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8050	Intercep dental tx primary	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8060	Intercep dental tx transiti	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8070	Compre dental tx transition	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8080	Compre dental tx adolescent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8090	Compre dental tx adult	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8210	Orthodontic rem appliance tx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8220	Fixed appliance therapy habt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8660	Preorthodontic tx visit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8670	Periodic orthodontc tx visit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8680	Orthodontic retention	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8690	Orthodontic treatment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8691	Repair ortho appliance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8692	Replacement retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D8999	Orthodontic procedure	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9110	Tx dental pain minor proc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D9210	Dent anesthesia w/o surgery	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9211	Regional block anesthesia	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9212	Trigeminal block anesthesia	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9215	Local anesthesia	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9220	General anesthesia	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9221	General anesthesia ea ad 15m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9230	Analgesia	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D9241	Intravenous sedation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9242	IV sedation ea ad 30 m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9248	Sedation (non-iv)	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9310	Dental consultation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9410	Dental house call	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9420	Hospital call	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9430	Office visit during hours	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9440	Office visit after hours	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9450	Case presentation tx plan	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9610	Dent therapeutic drug inject	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9630	Other drugs/medicaments	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D9910	Dent appl desensitizing med	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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D9911	Appl desensitizing resin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9920	Behavior management	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9930	Treatment of complications	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D9940	Dental occlusal guard	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D9941	Fabrication athletic guard	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9950	Occlusion analysis	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D9951	Limited occlusal adjustment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D9952	Complete occlusal adjustment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
D9970	Enamel microabrasion	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9971	Odontoplasty 1-2 teeth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9972	Extrnl bleaching per arch	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9973	Extrnl bleaching per tooth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9974	Intrnl bleaching per tooth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
D9999	Adjunctive procedure	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
E0100	Cane adjust/fixed with tip	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0105	Cane adjust/fixed quad/3 pro	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0110	Crutch forearm pair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0111	Crutch forearm each	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0112	Crutch underarm pair wood	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0113	Crutch underarm each wood	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0114	Crutch underarm pair no wood	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0116	Crutch underarm each no wood	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0117	Underarm springassist crutch	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0118	Crutch substitute	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0130	Walker rigid adjust/fixed ht	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0135	Walker folding adjust/fixed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0140	Walker w trunk support	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0141	Rigid walker wheeled wo seat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0143	Walker folding wheeled w/o s	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0144	Enclosed walker w rear seat	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0147	Walker variable wheel resist	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0148	Heavyduty walker no wheels	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0149	Heavy duty wheeled walker	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0153	Forearm crutch platform atta	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0154	Walker platform attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0155	Walker wheel attachment,pair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0156	Walker seat attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0157	Walker crutch attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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E0158	Walker leg extenders set of4	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0159	Brake for wheeled walker	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0160	Sitz type bath or equipment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0161	Sitz bath/equipment w/faucet	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0162	Sitz bath chair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0163	Commode chair stationry fxd	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0164	Commode chair mobile fixed a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0165	Commode chair stationry det	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0166	Commode chair mobile detach	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0167	Commode chair pail or pan	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0168	Heavyduty/wide commode chair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0169	Seatlift incorp commodechair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0175	Commode chair foot rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0176	Air pressre pad/cushion nonp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0177	Water press pad/cushion nonp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0178	Gel presse pad/cushion nonp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0179	Dry presse pad/cushion nonp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0180	Press pad alternating w pump	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0181	Press pad alternating w/ pum	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0182	Pressure pad alternating pum	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0184	Dry pressure mattress	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0185	Gel pressure mattress pad	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0186	Air pressure mattress	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0187	Water pressure mattress	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0188	Synthetic sheepskin pad	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0189	Lambswool sheepskin pad	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0190	Positioning cushion	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0191	Protector heel or elbow	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0192	Pad wheelchr low press/posit	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0193	Powered air flotation bed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0194	Air fluidized bed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0196	Gel pressure mattress	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0197	Air pressure pad for mattres	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0198	Water pressure pad for mattr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0199	Dry pressure pad for mattres	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0200	Heat lamp without stand	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0202	Phototherapy light w/ photom	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0203	Therapeutic lightbox tabletp	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X

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E0205	Heat lamp with stand	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0210	Electric heat pad standard	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0215	Electric heat pad moist	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0217	Water circ heat pad w pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0218	Water circ cold pad w pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0220	Hot water bottle	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0221	Infrared heating pad system	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0225	Hydrocollator unit	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0230	Ice cap or collar	Bundled	Bundled	0	0%	0%	0%	0	0	0	0	0	0			B
E0231	Wound warming device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0232	Warming card for NWT	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0235	Paraffin bath unit portable	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0236	Pump for water circulating p	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0238	Heat pad non-electric moist	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0239	Hydrocollator unit portable	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0240	Bath/shower chair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0241	Bath tub wall rail	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0242	Bath tub rail floor	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0243	Toilet rail	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0244	Toilet seat raised	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0245	Tub stool or bench	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0246	Transfer tub rail attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0247	Trans bench w/wo comm open	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0248	HDtrans bench w/wo comm open	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0249	Pad water circulating heat u	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0250	Hosp bed fixed ht w/ mattres	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0251	Hosp bed fixd ht w/o mattres	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0255	Hospital bed var ht w/ matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0256	Hospital bed var ht w/o matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0260	Hosp bed semi-electr w/ matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0261	Hosp bed semi-electr w/o mat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0265	Hosp bed total electr w/ mat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0266	Hosp bed total elec w/o matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0270	Hospital bed institutional t	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0271	Mattress innerspring	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0272	Mattress foam rubber	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0273	Bed board	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0274	Over-bed table	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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E0275	Bed pan standard	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0276	Bed pan fracture	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0277	Powered pres-redu air mattr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0280	Bed cradle	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0290	Hosp bed fx ht w/o rails w/m	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0291	Hosp bed fx ht w/o rail w/o	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0292	Hosp bed var ht w/o rail w/o	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0293	Hosp bed var ht w/o rail w/	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0294	Hosp bed semi-elect w/ mattr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0295	Hosp bed semi-elect w/o matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0296	Hosp bed total elect w/ matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0297	Hosp bed total elect w/o mat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0300	Enclosed ped crib hosp grade	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0301	HD hosp bed, 350-600 lbs	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0302	Ex hd hosp bed > 600 lbs	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0303	Hosp bed hvy dty xtra wide	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0304	Hosp bed xtra hvy dty x wide	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0305	Rails bed side half length	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0310	Rails bed side full length	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0315	Bed accessory brd/tbl/supprt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0316	Bed safety enclosure	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0325	Urinal male jug-type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0326	Urinal female jug-type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0350	Control unit bowel system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0352	Disposable pack w/bowel syst	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0370	Air elevator for heel	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0371	Nonpower mattress overlay	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0372	Powered air mattress overlay	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0373	Nonpowered pressure mattress	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0424	Stationary compressed gas O2	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0425	Gas system stationary compre	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0430	Oxygen system gas portable	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0431	Portable gaseous O2	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0434	Portable liquid O2	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0435	Oxygen system liquid portabl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0439	Stationary liquid O2	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0440	Oxygen system liquid station	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0441	Oxygen contents, gaseous	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS												
ABBREVIATED DESCRIPTION		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	
E0442	Oxygen contents, liquid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0443	Portable O2 contents, gas	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0444	Portable O2 contents, liquid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0445	Oximeter non-invasive	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0450	Volume vent stationary/porta	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0454	Pressure ventilator	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0455	Oxygen tent excl croup/ped t	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0457	Chest shell	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0459	Chest wrap	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0460	Neg press vent portabl/statn	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0461	Vol vent noninvasive interfa	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0462	Rocking bed w/ or w/o side r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0470	RAD w/o backup non-inv intfc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0471	RAD w/backup non inv intrfc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0472	RAD w backup invasive intrfc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0480	Percussor elect/pneum home m	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0481	Intrpulmny percuss vent sys	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0482	Cough stimulating device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0483	Chest compression gen system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0484	Non-elec oscillatory pep dvc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0500	Ippb all types	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X	
E0550	Humidif extens supple w ippb	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0555	Humidifier for use w/ regula	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0560	Humidifier supplemental w/ i	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0561	Humidifier nonheated w PAP	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0562	Humidifier heated used w PAP	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0565	Compressor air power source	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0570	Nebulizer with compression	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0571	Aerosol compressor for svneb	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0572	Aerosol compressor adjust pr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0574	Ultrasonic generator w svneb	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N	
E0575	Nebulizer ultrasonic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0580	Nebulizer for use w/ regulat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0585	Nebulizer w/ compressor & he	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0590	Dispensing fee dme neb drug	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X	
E0600	Suction pump portab hom modl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0601	Cont airway pressure device	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N	
E0602	Manual breast pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X	

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
E0603	Electric breast pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0604	Hosp grade elec breast pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0605	Vaporizer room type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0606	Drainage board postural	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0607	Blood glucose monitor home	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0610	Pacemaker monitr audible/vis	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0615	Pacemaker monitr digital/vis	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0616	Cardiac event recorder	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0617	Automatic ext defibrillator	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0618	Apnea monitor	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0619	Apnea monitor w recorder	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0620	Cap bld skin piercing laser	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0621	Patient lift sling or seat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0625	Patient lift bathroom or toi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0627	Seat lift incorp lift-chair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0628	Seat lift for pt furn-electr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0629	Seat lift for pt furn-non-el	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0630	Patient lift hydraulic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0635	Patient lift electric	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0636	PT support & positioning sys	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0637	Sit-stand w seatlift	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0638	Standing frame sys	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0650	Pneuma compressor non-segment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0651	Pneum compressor segmental	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0652	Pneum compres w/cal pressure	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0655	Pneumatic appliance half arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0660	Pneumatic appliance full leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0665	Pneumatic appliance full arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0666	Pneumatic appliance half leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0667	Seg pneumatic appl full leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0668	Seg pneumatic appl full arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0669	Seg pneumatic appli half leg	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0671	Pressure pneum appl full leg	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0672	Pressure pneum appl full arm	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0673	Pressure pneum appl half leg	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0675	Pneumatic compression device	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0691	Uvl pnl 2 sq ft or less	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0692	Uvl sys panel 4 ft	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
E0693	Uvl sys panel 6 ft	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0694	Uvl md cabinet sys 6 ft	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0700	Safety equipment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0701	Helmet w face guard prefab	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0710	Restraints any type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0720	Tens two lead	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0730	Tens four lead	Contracted	Contracted	0	0%	0%	0%	0	0	0	0	0	0			C
E0731	Conductive garment for tens/	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0740	Incontinence treatment systm	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0744	Neuromuscular stim for scoli	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0745	Neuromuscular stim for shock	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0746	Electromyograph biofeedback	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0747	Elec osteogen stim not spine	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0748	Elec osteogen stim spinal	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0749	Elec osteogen stim implanted	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0752	Neurostimulator electrode	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0754	Pulsegenerator pt programmer	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0755	Electronic salivary reflex s	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0756	Implantable pulse generator	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0757	Implantable RF receiver	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0758	External RF transmitter	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0759	Replace rdfrcuncy transmitt	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0760	Osteogen ultrasound stimltor	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0761	Nontherm electromgntc device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0765	Nerve stimulator for tx n&v	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0776	Iv pole	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0779	Amb infusion pump mechanical	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0780	Mech amb infusion pump <8hrs	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0781	External ambulatory infus pu	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0782	Non-programble infusion pump	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0783	Programmable infusion pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0784	Ext amb infusn pump insulin	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0785	Replacement impl pump cathet	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0786	Implantable pump replacement	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E0791	Parenteral infusion pump sta	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0830	Ambulatory traction device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0840	Tract frame attach headboard	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0850	Traction stand free standing	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
E0855	Cervical traction equipment	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E0860	Tract equip cervical tract	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0870	Tract frame attach footboard	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0880	Trac stand free stand extrem	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0890	Traction frame attach pelvic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0900	Trac stand free stand pelvic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0910	Trapeze bar attached to bed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0920	Fracture frame attached to b	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0930	Fracture frame free standing	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0935	Exercise device passive moti	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0940	Trapeze bar free standing	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0941	Gravity assisted traction de	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
E0942	Cervical head harness/halter	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0944	Pelvic belt/harness/boot	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0945	Belt/harness extremity	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0946	Fracture frame dual w cross	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0947	Fracture frame attachmnts pe	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0948	Fracture frame attachmnts ce	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0950	Tray	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0951	Loop heel	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0952	Loop tie	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0953	Pneumatic tire	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0954	Wheelchair semi-pneumatic ca	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0955	Cushioned headrest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0956	W/c lateral trunk/hip suppor	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0957	W/c medial thigh support	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0958	Whlchr att- conv 1 arm drive	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0959	Amputee adapter	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0960	W/c shoulder harness/straps	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0961	Wheelchair brake extension	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0962	Wheelchair 1 inch cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0963	Wheelchair 2 inch cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0964	Wheelchair 3 inch cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0965	Wheelchair 4 inch cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0966	Wheelchair head rest extensi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0967	Wheelchair hand rims	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0968	Wheelchair commode seat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E0969	Wheelchair narrowing device	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE			
															FSI		
E0970	Wheelchair no. 2 footplates	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0971	Wheelchair anti-tipping devi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0972	Transfer board or device	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0973	Wheelchair adjustabl height	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0974	Wheelchair grade-aid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0977	Wheelchair wedge cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0978	Wheelchair belt w/airplane b	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0980	Wheelchair safety vest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0981	Seat upholstery, replacement	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0982	Back upholstery, replacement	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0983	Add pwr joystick	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0984	Add pwr tiller	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0985	W/c seat lift mechanism	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0986	Man w/c push-rim pow assist	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0990	Whellchair elevating leg res	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0992	Wheelchair solid seat insert	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0994	Wheelchair arm rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0995	Wheelchair calf rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0996	Wheelchair tire solid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0997	Wheelchair caster w/ a fork	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0998	Wheelchair caster w/o a fork	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E0999	Wheelchr pneumatic tire w/wh	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1000	Wheelchair tire pneumatic ca	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1001	Wheelchair wheel	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1002	Pwr seat tilt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1003	Pwr seat recline	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1004	Pwr seat recline mech	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1005	Pwr seat recline pwr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1006	Pwr seat combo w/o shear	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1007	Pwr seat combo w/shear	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1008	Pwr seat combo pwr shear	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1009	Add mech leg elevation	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1010	Add pwr leg elevation	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
E1011	Ped wc modify width adjustm	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X		
E1012	Int seat sys planar ped w/c	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X		
E1013	Int seat sys contour ped w/c	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X		
E1014	Reclining back add ped w/c	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X		
E1015	Shock absorber for man w/c	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N		

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E1016	Shock absorber for power w/c	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1017	HD shck absrbr for hd man wc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1018	HD shck absrber for hd powwc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1019	HD feature power seat	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1020	Residual limb support system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1021	EX HD feature power seat	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1025	Pedwc lat/thor sup nocontour	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1026	Pedwc contoured lat/thor sup	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1027	Ped wc lat/ant support	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1028	W/c manual swingaway	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1029	W/c vent tray fixed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1030	W/c vent tray gimbaled	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1031	Rollabout chair with casters	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1035	Patient transfer system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1037	Transport chair, ped size	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1038	Transport chair, adult size	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1050	Wheelchr fxd full length arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1060	Wheelchair detachable arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1070	Wheelchair detachable foot r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1083	Hemi-wheelchair fixed arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1084	Hemi-wheelchair detachable a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1085	Hemi-wheelchair fixed arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1086	Hemi-wheelchair detachable a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1087	Wheelchair lightwt fixed arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1088	Wheelchair lightweight det a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1089	Wheelchair lightwt fixed arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1090	Wheelchair lightweight det a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1092	Wheelchair wide w/ leg rests	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1093	Wheelchair wide w/ foot rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1100	Whchr s-recl fxd arm leg res	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1110	Wheelchair semi-recl detach	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1130	Whlchr stand fxd arm ft rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1140	Wheelchair standard detach a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1150	Wheelchair standard w/ leg r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1160	Wheelchair fixed arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1161	Manual adult wc w tiltinspac	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1170	Whlchr ampu fxd arm leg rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1171	Wheelchair amputee w/o leg r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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E1172	Wheelchair amputee detach ar	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1180	Wheelchair amputee w/ foot r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1190	Wheelchair amputee w/ leg re	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1195	Wheelchair amputee heavy dut	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1200	Wheelchair amputee fixed arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1210	Whlchr moto ful arm leg rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1211	Wheelchair motorized w/ det	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1212	Wheelchair motorized w full	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1213	Wheelchair motorized w/ det	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1220	Whlchr special size/constrc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1221	Wheelchair spec size w foot	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1222	Wheelchair spec size w/ leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1223	Wheelchair spec size w foot	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1224	Wheelchair spec size w/ leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1225	Wheelchair spec sz semi-recl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1226	Wheelchair spec sz full-recl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1227	Wheelchair spec sz spec ht a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1228	Wheelchair spec sz spec ht b	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1230	Power operated vehicle	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1231	Rigid ped w/c tilt-in-space	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1232	Folding ped wc tilt-in-space	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1233	Rig ped wc tltnspc w/o seat	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1234	Fld ped wc tltnspc w/o seat	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1235	Rigid ped wc adjustable	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1236	Folding ped wc adjustable	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1237	Rgd ped wc adjstabl w/o seat	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1238	Fld ped wc adjstabl w/o seat	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
E1240	Whchr litwt det arm leg rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1250	Wheelchair lightwt fixed arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1260	Wheelchair lightwt foot rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1270	Wheelchair lightweight leg r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1280	Whchr h-duty det arm leg res	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1285	Wheelchair heavy duty fixed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1290	Wheelchair hvy duty detach a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1295	Wheelchair heavy duty fixed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1296	Wheelchair special seat heig	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1297	Wheelchair special seat dept	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1298	Wheelchair spec seat depth/w	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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E1300	Whirlpool portable	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1310	Whirlpool non-portable	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1340	Repair for DME, per 15 min	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1353	Oxygen supplies regulator	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1355	Oxygen supplies stand/rack	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1372	Oxy suppl heater for nebuliz	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1390	Oxygen concentrator	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1391	Oxygen concentrator, dual	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1399	Durable medical equipment mi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1405	O2/water vapor enrich w/heat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1406	O2/water vapor enrich w/o he	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1500	Centrifuge	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1510	Kidney dialysate delivry sys	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1520	Heparin infusion pump	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1530	Replacement air bubble detec	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1540	Replacement pressure alarm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1550	Bath conductivity meter	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1560	Replace blood leak detector	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1570	Adjustable chair for esrd pt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1575	Transducer protect/flid bar	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1580	Unipuncture control system	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1590	Hemodialysis machine	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1592	Auto interm peritoneal dialy	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1594	Cycler dialysis machine	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1600	Deli/install chrg hemo equip	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1610	Reverse osmosis h2o puri sys	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1615	Deionizer H2O puri system	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1620	Replacement blood pump	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1625	Water softening system	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1630	Reciprocating peritoneal dia	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1632	Wearable artificial kidney	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1634	Peritoneal dialysis clamp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1635	Compact travel hemodialyzer	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1636	Sorbent cartridges per 10	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1637	Hemostats for dialysis, each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1639	Dialysis scale	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
E1699	Dialysis equipment noc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E1700	Jaw motion rehab system	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS												LIC REQ	
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI			
E1701	Repl cushions for jaw motion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E1702	Repl measr scales jaw motion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E1800	Adjust elbow ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1801	SPS elbow device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1802	Adjst forearm pro/sup device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1805	Adjust wrist ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1806	SPS wrist device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1810	Adjust knee ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1811	SPS knee device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1815	Adjust ankle ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1816	SPS ankle device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1818	SPS forearm device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1820	Soft interface material	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1821	Replacement interface SPSPD	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1825	Adjust finger ext/flex devc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1830	Adjust toe ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1840	Adj shoulder ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E1902	AAC non-electronic board	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E2000	Gastric suction pump hme mdl	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E2100	Bld glucose monitor w voice	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E2101	Bld glucose monitor w lance	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
E2120	Pulse gen sys tx endolymph fl	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X		
E2201	Man w/ch acc seat w>=20"<24"	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2202	Seat width 24-27 in	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2203	Frame depth less than 22 in	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2204	Frame depth 22 to 25 in	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2300	Pwr seat elevation sys	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2301	Pwr standing	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2310	Electro connect btw control	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2311	Electro connect btw 2 sys	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2320	Hand chin control	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2321	Hand interface joystick	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2322	Mult mech switches	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2323	Special joystick handle	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2324	Chin cup interface	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2325	Sip and puff interface	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2326	Breath tube kit	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		
E2327	Head control interface mech	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N		

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CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
E2328	Head/extremity control inter	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2329	Head control nonproportional	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2330	Head control proximity switc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2331	Attendant control	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2340	W/c width 20-23 in seat frame	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2341	W/c width 24-27 in seat frame	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2342	W/c dpth 20-21 in seat frame	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2343	W/c dpth 22-25 in seat frame	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2351	Electronic SGD interface	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2360	22nf nonsealed leadacid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2361	22nf sealed leadacid battery	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2362	Gr24 nonsealed leadacid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2363	Gr24 sealed leadacid battery	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2364	U1nonsealed leadacid battery	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2365	U1 sealed leadacid battery	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2366	Battery charger, single mode	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2367	Battery charger, dual mode	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2399	Noc interface	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2402	Neg press wound therapy pump	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2500	SGD digitized pre-rec <=8min	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2502	SGD prerec msg >8min <=20min	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2504	SGD prerec msg>20min <=40min	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2506	SGD prerec msg > 40 min	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2508	SGD spelling phys contact	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2510	SGD w multi methods msg/accs	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2511	SGD sftwre prgrm for PC/PDA	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2512	SGD accessory, mounting sys	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
E2599	SGD accessory noc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
G0001	Drawing blood for specimen	\$4.20	\$4.20	0	0%	0%	0%	9	9	9	9	9	9			L
G0008	Admin influenza virus vac	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
G0009	Admin pneumococcal vaccine	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
G0010	Admin hepatitis b vaccine	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
G0027	Semen Analysis	\$12.73	\$12.73	0	0%	0%	0%	9	9	9	9	9	9			L
G0030	PET imaging prev PET single	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0030-26	PET imaging prev PET single	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0030-TC	PET imaging prev PET single	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0031	PET imaging prev PET multiple	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0031-26	PET imaging prev PET multiple	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
G0031-TC	PET imaging prev PET multiple	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0032	PET follow SPECT 78464 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0032-26	PET follow SPECT 78464 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0032-TC	PET follow SPECT 78464 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0033	PET follow SPECT 78464 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0033-26	PET follow SPECT 78464 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0033-TC	PET follow SPECT 78464 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0034	PET follow SPECT 76865 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0034-26	PET follow SPECT 76865 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0034-TC	PET follow SPECT 76865 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0035	PET follow SPECT 78465 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0035-26	PET follow SPECT 78465 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0035-TC	PET follow SPECT 78465 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0036	PET follow cornry angio sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0036-26	PET follow cornry angio sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0036-TC	PET follow cornry angio sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0037	PET follow cornry angio mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0037-26	PET follow cornry angio mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0037-TC	PET follow cornry angio mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0038	PET follow myocard perf sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0038-26	PET follow myocard perf sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0038-TC	PET follow myocard perf sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0039	PET follow myocard perf mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0039-26	PET follow myocard perf mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0039-TC	PET follow myocard perf mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0040	PET follow stress echo singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0040-26	PET follow stress echo singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0040-TC	PET follow stress echo singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0041	PET follow stress echo mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0041-26	PET follow stress echo mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0041-TC	PET follow stress echo mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0042	PET follow ventriculogm sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0042-26	PET follow ventriculogm sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0042-TC	PET follow ventriculogm sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0043	PET follow ventriculogm mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0043-26	PET follow ventriculogm mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0043-TC	PET follow ventriculogm mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0044	PET following rest ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X

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Professional Services Fee Schedule

HPCPS
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HPCPS		DOLLAR VALUE		MODIFIERS												LIC
CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
G0044-26	PET following rest ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0044-TC	PET following rest ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0045	PET following rest ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0045-26	PET following rest ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0045-TC	PET following rest ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0046	PET follow stress ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0046-26	PET follow stress ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0046-TC	PET follow stress ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0047	PET follow stress ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0047-26	PET follow stress ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0047-TC	PET follow stress ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0101	CA screen;pelvic/breast exam	\$49.62	\$31.90	0	0%	0%	0%	0	0	0	0	0	0			R
G0102	Prostate ca screening; dre	Bundled	Bundled	0	0%	0%	0%	0	9	9	9	9	9			B
G0103	Psa, total screening	\$35.98	\$35.98	0	0%	0%	0%	9	9	9	9	9	9			L
G0104	CA screen;flexi sigmoidscope	\$163.53	\$77.97	0	0%	0%	0%	0	2	0	1	0	0			R
G0105	Colorectal scrn; hi risk ind	\$506.30	\$277.96	0	0%	0%	0%	0	2	0	1	0	0			R
G0105-53	Colorectal scrn; hi risk ind	\$163.53	\$77.97	0	0%	0%	0%	0	2	0	1	0	0			R
G0106	Colon CA screen;barium enema	\$188.85	\$188.85	0	0%	0%	0%	1	0	0	0	0	0			R
G0106-26	Colon CA screen;barium enema	\$69.36	\$69.36	0	0%	0%	0%	1	0	0	0	0	0			R
G0106-TC	Colon CA screen;barium enema	\$119.99	\$119.99	0	0%	0%	0%	1	0	0	0	0	0			R
G0107	CA screen; fecal blood test	\$6.36	\$6.36	0	0%	0%	0%	9	9	9	9	9	9			L
G0108	Diab manage trn per indiv	\$43.54	\$43.54	0	0%	0%	0%	0	0	0	0	0	0			R
G0109	Diab manage trn ind/group	\$24.81	\$24.81	0	0%	0%	0%	0	0	0	0	0	0			R
G0110	Nett pulm-rehab educ; ind	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0111	Nett pulm-rehab educ; group	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0112	Nett;nutrition guid, initial	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0113	Nett;nutrition guid,subseqnt	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0114	Nett; psychosocial consult	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0115	Nett; psychological testing	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0116	Nett; psychosocial counsel	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0117	Glaucoma scrn high risk direc	Bundled	Bundled	0	0%	0%	0%	0	0	0	0	0	0			B
G0118	Glaucoma scrn high risk direc	Bundled	Bundled	0	0%	0%	0%	0	0	0	0	0	0			B
G0120	Colon ca scrn; barium enema	\$188.85	\$188.85	0	0%	0%	0%	1	0	0	0	0	0			R
G0120-26	Colon ca scrn; barium enema	\$69.36	\$69.36	0	0%	0%	0%	1	0	0	0	0	0			R
G0120-TC	Colon ca scrn; barium enema	\$119.99	\$119.99	0	0%	0%	0%	1	0	0	0	0	0			R
G0121	Colon ca scrn not hi rsk ind	\$506.30	\$277.96	0	0%	0%	0%	0	2	0	1	0	0			R
G0121-53	Colon ca scrn not hi rsk ind	\$163.53	\$77.97	0	0%	0%	0%	0	2	0	1	0	0			R
G0122	Colon ca scrn; barium enema	\$188.85	\$188.85	0	0%	0%	0%	1	9	9	9	9	9			R

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
G0122-26	Colon ca scrn; barium enema	\$71.89	\$71.89	0	0%	0%	0%	1	9	9	9	9	9			R
G0122-TC	Colon ca scrn; barium enema	\$117.46	\$117.46	0	0%	0%	0%	1	9	9	9	9	9			R
G0123	Screen cerv/vag thin layer	\$39.63	\$39.63	0	0%	0%	0%	9	9	9	9	9	9			L
G0124	Screen c/v thin layer by MD	\$30.88	\$30.88	0	0%	0%	0%	0	0	0	0	0	0			R
G0125	PET image pulmonary nodule	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0125-26	PET image pulmonary nodule	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0125-TC	PET image pulmonary nodule	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0127	Trim nail(s)	\$21.77	\$12.66	0	0%	0%	0%	0	2	0	1	0	0			R
G0128	CORF skilled nursing service	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0129	Part. Hosp. Prog. Occupa Tx.	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
G0130	Single energy x-ray study	\$58.73	\$58.73	0	0%	0%	0%	1	0	0	0	0	0			R
G0130-26	Single energy x-ray study	\$15.19	\$15.19	0	0%	0%	0%	1	0	0	0	0	0			R
G0130-TC	Single energy x-ray study	\$43.54	\$43.54	0	0%	0%	0%	1	0	0	0	0	0			R
G0141	Scr c/v cyto,autosys and md	\$30.88	\$30.88	0	0%	0%	0%	0	0	0	0	0	0			R
G0143	Scr c/v cyto,thinlayer,rescr	\$39.63	\$39.63	0	0%	0%	0%	9	9	9	9	9	9			L
G0144	Scr c/v cyto,thinlayer,rescr	\$41.79	\$41.79	0	0%	0%	0%	9	9	9	9	9	9			L
G0145	Scr c/v cyto,thinlayer,rescr	\$51.81	\$51.81	0	0%	0%	0%	9	9	9	9	9	9			L
G0147	Scr c/v cyto, automated sys	\$22.26	\$22.26	0	0%	0%	0%	9	9	9	9	9	9			L
G0148	Scr c/v cyto, autosys, rescr	\$29.72	\$29.72	0	0%	0%	0%	9	9	9	9	9	9			L
G0151	HHCP-serv of pt,ea 15 min	\$32.91	\$32.91	0	0%	0%	0%	0	0	0	0	0	0			F
G0152	HHCP-serv of ot,ea 15 min	\$34.11	\$34.11	0	0%	0%	0%	0	0	0	0	0	0			F
G0153	HHCP-svs of s/l path,ea 15mn	\$34.11	\$34.11	0	0%	0%	0%	0	0	0	0	0	0			F
G0154	HHCP-svs of m,ea 15 min	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0155	HHCP-svs of csw,ea 15 min	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0156	HHCP-svs of aide,ea 15 min	\$5.73	\$5.73	0	0%	0%	0%	0	0	0	0	0	0			F
G0166	Extrnl counterpulse, per tx	\$187.33	\$5.57	0	0%	0%	0%	0	9	9	9	9	9			R
G0168	Wound closure by adhesive	\$121.51	\$31.39	0	0%	0%	0%	0	2	0	1	0	0			R
G0173	Stereo radioisurgery,complete	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G0175	OPPS Service,sched team conf	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9			O
G0176	OPPS/PHP;activity therapy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
G0177	OPPS/PHP; train & educ serv	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9			O
G0179	MD recertification HHA PT	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0180	MD certification HHA patient	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0181	Home health care supervision	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0182	Hospice care supervision	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0186	Dstry eye lesn,fdr vssl tech	By Report	By Report	90	0%	0%	0%	0	2	1	0	1	1			N
G0202	Screeningmammographydigital	\$182.77	\$182.77	0	0%	0%	0%	1	0	2	0	0	0			R
G0202-26	Screeningmammographydigital	\$49.11	\$49.11	0	0%	0%	0%	1	0	2	0	0	0			R

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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
G0202-TC	Screeningmammographydigital	\$133.66	\$133.66	0	0%	0%	0%	1	0	2	0	0	0			R
G0204	Diagnosticmammographydigital	\$192.90	\$192.90	0	0%	0%	0%	1	0	2	0	0	0			R
G0204-26	Diagnosticmammographydigital	\$61.26	\$61.26	0	0%	0%	0%	1	0	2	0	0	0			R
G0204-TC	Diagnosticmammographydigital	\$131.64	\$131.64	0	0%	0%	0%	1	0	2	0	0	0			R
G0206	Diagnosticmammographydigital	\$154.93	\$154.93	0	0%	0%	0%	1	0	0	0	0	0			R
G0206-26	Diagnosticmammographydigital	\$49.11	\$49.11	0	0%	0%	0%	1	0	0	0	0	0			R
G0206-TC	Diagnosticmammographydigital	\$105.82	\$105.82	0	0%	0%	0%	1	0	0	0	0	0			R
G0210	PET img wholebody dxlung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0210-26	PET img wholebody dxlung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0210-TC	PET img wholebody dxlung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0211	PET img wholbody init lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0211-26	PET img wholbody init lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0211-TC	PET img wholbody init lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0212	PET img wholebod restag lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0212-26	PET img wholebod restag lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0212-TC	PET img wholebod restag lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0213	PET img wholbody dx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0213-26	PET img wholbody dx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0213-TC	PET img wholbody dx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0214	PET img wholebod init	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0214-26	PET img wholebod init	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0214-TC	PET img wholebod init	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0215	PETimg wholebod restag	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0215-26	PETimg wholebod restag	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0215-TC	PETimg wholebod restag	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0216	PET img wholebod dx melanoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0216-26	PET img wholebod dx melanoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0216-TC	PET img wholebod dx melanoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0217	PET img wholebod init melan	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0217-26	PET img wholebod init melan	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0217-TC	PET img wholebod init melan	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0218	PET img wholebod restag mela	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0218-26	PET img wholebod restag mela	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0218-TC	PET img wholebod restag mela	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0219	PET img wholbod melano nonco	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9			X
G0219-26	PET img wholbod melano nonco	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9			X
G0219-TC	PET img wholbod melano nonco	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9			X
G0220	PET img wholebod dx lymphoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
G0220-26	PET img wholebod dx lymphoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0220-TC	PET img wholebod dx lymphoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0221	PET imag wholbod init lympho	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0221-26	PET imag wholbod init lympho	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0221-TC	PET imag wholbod init lympho	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0222	PET imag wholbod resta lymph	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0222-26	PET imag wholbod resta lymph	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0222-TC	PET imag wholbod resta lymph	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0223	PET imag wholbod reg dx head	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0223-26	PET imag wholbod reg dx head	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0223-TC	PET imag wholbod reg dx head	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0224	PET imag wholbod reg ini hea	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0224-26	PET imag wholbod reg ini hea	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0224-TC	PET imag wholbod reg ini hea	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0225	PET whol restag headneckonly	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0225-26	PET whol restag headneckonly	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0225-TC	PET whol restag headneckonly	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0226	PET img wholbody dx esophagl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0226-26	PET img wholbody dx esophagl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0226-TC	PET img wholbody dx esophagl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0227	PET img wholbod ini esophage	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0227-26	PET img wholbod ini esophage	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0227-TC	PET img wholbod ini esophage	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0228	PET img wholbod restg esopha	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0228-26	PET img wholbod restg esopha	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0228-TC	PET img wholbod restg esopha	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0229	PET img metaboloc brain pres	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0229-26	PET img metaboloc brain pres	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0229-TC	PET img metaboloc brain pres	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0230	PET myocard viability post	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0230-26	PET myocard viability post	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0230-TC	PET myocard viability post	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0231	PET WhBD colorec; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0231-26	PET WhBD colorec; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0231-TC	PET WhBD colorec; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0232	PET whbd lymphoma; gamma carr	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0232-26	PET whbd lymphoma; gamma carr	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
G0232-TC	PET whbd lymphoma; gamma carr	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X

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HCPCS
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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
G0233	PET whbd melanoma; gamma can	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0233-26	PET whbd melanoma; gamma can	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0233-TC	PET whbd melanoma; gamma can	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0234	PET WhBD pulm nod; gamma carr	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0234-26	PET WhBD pulm nod; gamma carr	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0234-TC	PET WhBD pulm nod; gamma carr	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0237	Therapeutic procd strg endur	\$24.81	\$24.81	0	0%	0%	0%	0	0	0	0	0	0		R	
G0238	Oth resp proc, indiv	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
G0239	Oth resp proc, group	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
G0242	Multisource photon ster plan	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0243	Multisour photon stero treat	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0244	Observ care by facility topt	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0245	Initial foot exam pt lops	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0246	Followup eval of foot pt lop	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0247	Routine footcare pt w lops	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0248	Demonstrate use home inr mon	\$345.80	\$345.80	0	0%	0%	0%	3	0	0	0	0	0		R	
G0249	Provide test material,equipm	\$200.49	\$200.49	0	0%	0%	0%	3	0	0	0	0	0		R	
G0250	MD review interpret of test	\$12.66	\$12.66	0	0%	0%	0%	2	0	0	0	0	0		R	
G0251	Linear acc based stero radio	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0252	PET imaging initial dx	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0252-26	PET imaging initial dx	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0252-TC	PET imaging initial dx	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0253	PET image brst dection recur	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0253-26	PET image brst dection recur	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0253-TC	PET image brst dection recur	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0254	PET image brst eval to tx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0254-26	PET image brst eval to tx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0254-TC	PET image brst eval to tx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0255	Current percep threshold tst	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0255-26	Current percep threshold tst	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0255-TC	Current percep threshold tst	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0257	Unsched dialysis ESRD pt hos	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0259	Inject for sacroiliac joint	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0260	Inj for sacroiliac jt anesth	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0263	Adm with CHF, CP, asthma	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0264	Assmt otr CHF, CP, asthma	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0265	Cryopresevation Freeze+stora	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0266	Thawing + expansion froz cel	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective July 1, 2004

HPCPS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
G0267	Bone marrow or psc harvest	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0268	Removal of impacted wax md	Not Covered	Not Covered	0	0%	0%	0%	0	2	2	1	0	0		X	
G0269	Occlusive device in vein art	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0270	MNT subs tx for change dx	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0271	Group MNT 2 or more 30 mins	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0275	Renal angio, cardiac cath	\$18.23	\$18.23	0	0%	0%	0%	0	0	0	0	0	0		R	
G0278	Iliac art angio,cardiac cath	\$18.23	\$18.23	0	0%	0%	0%	0	0	0	0	0	0		R	
G0279	Excorp shock tx, elbow epi	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0280	Excorp shock tx other than	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0281	Elec stim unattend for press	\$15.19	\$15.19	0	0%	0%	0%	0	0	0	0	0	0		R	
G0282	Elect stim wound care not pd	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0283	Elec stim other than wound	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0288	Recon, CTA for surg plan	\$552.88	\$552.88	0	0%	0%	0%	3	0	0	0	0	0		R	
G0289	Arthro, loose body + chondro	\$116.96	\$116.96	0	0%	0%	0%	0	0	1	0	0	0		R	
G0290	Drug-eluting stents, single	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0291	Drug-eluting stents,each add	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0292	Adm exp drugs,clinical trial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0293	Non-cov surg proc,clin trial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0294	Non-cov proc, clinical trial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0295	Electromagnetic therapy onc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0296	PET imge restag thyrod cance	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0296-26	PET imge restag thyrod cance	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0296-TC	PET imge restag thyrod cance	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0297	Insert single chamber/cd	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0298	Insert dual chamber/cd	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0299	Inser/repos single icd+leads	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0300	Insert reposit lead dual+gen	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0302	Pre-op service LVRS complete	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0303	Pre-op service LVRS 10-15dos	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0304	Pre-op service LVRS 1-9 dos	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0305	Post op service LVRS min 6	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
G0306	CBC/diffwbc w/o platelet	\$15.20	\$15.20	0	0%	0%	0%	9	9	9	9	9	9		L	
G0307	CBC without platelet	\$12.66	\$12.66	0	0%	0%	0%	9	9	9	9	9	9		L	
G0308	ESRD related svc 4+mo<2yrs	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0309	ESRD related svc 2-3mo<2yrs	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0310	ESRD related svc 1 visit<2yr	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0311	ESRD related svs 4+mo 2-11yr	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0312	ESRD relate svs 2-3 mo 2-11y	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	

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HCPCS
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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
G0313	ESRD related svs 1 mon 2-11y	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0314	ESRD related svs 4+ mo 12-19	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0315	ESRD related svs 2-3mo 12-19	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0316	ESRD relate svs 1 vist 12-19	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0317	ESRD related svs 4+mo 20+yrs	\$411.62	\$411.62	0	0%	0%	0%	0	0	0	0	0	0			R
G0318	ESRD related svs 2-3 mo 20+y	\$342.77	\$342.77	0	0%	0%	0%	0	0	0	0	0	0			R
G0319	ESRD related svs 1 visit 20+	\$273.91	\$273.91	0	0%	0%	0%	0	0	0	0	0	0			R
G0320	ESRD related svs home under2	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0321	ESRD related svs home mo<2ys	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0322	ESRD relate svs home mo12-19	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0323	ESRD related svs home mo 20+	\$342.77	\$342.77	0	0%	0%	0%	0	0	0	0	0	0			R
G0324	ESRD related svs home/dy<2y	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0325	ESRD relate home/dy 2-11 yr	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0326	ESRD relate home/dy 12-19y	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
G0327	ESRD relate home/dy 20+yrs	\$11.64	\$11.64	0	0%	0%	0%	0	0	0	0	0	0			R
G0328	Fecal blood scrn immunoassay	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
G0329	Electromagnetic tx for ulcers	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
G0338	Linear accelerator stero pln	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			O
G0339	Robot lin-radsurg com, first	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			O
G0340	Robt lin-radsurg fractx 2-5	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			O
G3001	Admin + supply, tositumomab	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
G9001	MCCD, initial rate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9002	MCCD,maintenance rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
G9003	MCCD, risk adj hi, initial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
G9004	MCCD, risk adj lo, initial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
G9005	MCCD, risk adj, maintenance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9006	MCCD, Home monitoring	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9007	MCCD, sch team conf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9008	Mccd,phys coor-care ovrsght	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9009	MCCD, risk adj, level 3	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9010	MCCD, risk adj, level 4	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9011	MCCD, risk adj, level 5	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9012	Other Specified Case Mgmt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
G9016	Demo-smoking cessation coun	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H0001	Alcohol and/or drug assess	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H0002	Alcohol and/or drug screenin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H0003	Alcohol and/or drug screenin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H0004	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS												LIC REQ	
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI			
H0005	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0006	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0007	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0008	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0009	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0010	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0011	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0012	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0013	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0014	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0015	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0016	Alcohol and/or drug services	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0017	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0018	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0019	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0020	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N		
H0021	Alcohol and/or drug training	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0022	Alcohol and/or drug interven	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0023	Alcohol and/or drug outreach	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0024	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0025	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0026	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0027	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0028	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0029	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0030	Alcohol and/or drug hotline	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0031	MH health assess by non-md	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0032	MH svc plan dev by non-md	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0033	Oral med adm direct observe	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0034	Med trng & support per 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0035	MH partial hosp tx under 24h	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0036	Comm psy face-face per 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0037	Comm psy sup tx pgm per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0038	Self-help/peer svc per 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0039	Asser com tx face-face/15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0040	Assert comm tx pgm per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0041	Fos c chld non-ther per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		
H0042	Fos c chld non-ther per mon	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X		

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HPCPS CPT ^(c) CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE		MODIFIERS												LIC REQ
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
H0043	Supported housing, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H0044	Supported housing, per month	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H0045	Respite not-in-home per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H0046	Mental health service, nos	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H0047	Alcohol/drug abuse svc nos	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H0048	Spec coll non-blood:a/d test	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H1000	Prenatal care atrisk assessm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H1001	Antepartum management	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H1002	Carecoordination prenatal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H1003	Prenatal at risk education	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H1004	Follow up home visit/prental	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H1005	Prenatalcare enhanced srv pk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
H1010	Nonmed family planning ed	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H1011	Family assessment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2000	Comp multidisipln evaluation	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2001	Rehabilitation program 1/2 d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2010	Comprehensive med svc 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2011	Crisis interven svc, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2012	Behav Hlth Day Treat, per hr	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2013	Psych hlth fac svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2014	Skills Train and Dev, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2015	Comp Comm Supp Svc, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2016	Comp Comm Supp Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2017	PsySoc Rehab Svc, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2018	PsySoc Rehab Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2019	Ther Behav Svc, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2020	Ther Behav Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2021	Com Wrap-Around Sv, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2022	Com Wrap-Around Sv, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2023	Supported Employ, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2024	Supported Employ, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2025	Supp Maint Employ, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2026	Supp Maint Employ, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2027	Psychoed Svc, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2028	Sex Offend Tx Svc, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2029	Sex Offend Tx Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2030	MH Clubhouse Svc, per 15	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2031	MH Clubhouse Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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HPCPS		DOLLAR VALUE		MODIFIERS												LIC
CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
H2032	Activity Therapy, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2033	Multisys Ther/Juvenile 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2034	A/D Halfway House, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2035	A/D Tx Program, per hour	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2036	A/D Tx Program, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
H2037	Dev Delay Prev Dp Ch, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J0120	Tetracyclin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0130	Abciximab injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0150	Injection adenosine 6 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0152	Adenosine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0170	Adrenalin epinephrin inject	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0190	Inj biperiden lactate/5 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J0200	Alatrofloxacin mesylate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0205	Alglucerase injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0207	Amifostine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0210	Methyldopate hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0215	Alefacept	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J0256	Alpha 1 proteinase inhibitor	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0270	Alprostadil for injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0275	Alprostadil urethral suppos	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0280	Aminophyllin 250 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0282	Amiodarone HCl	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0285	Amphotericin B	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0287	Amphotericin b lipid complex	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0288	Ampho b cholesteryl sulfate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0289	Amphotericin b liposome inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0290	Ampicillin 500 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0295	Ampicillin sodium per 1.5 gm	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0300	Amobarbital 125 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0330	Succinylcholine chloride inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0350	Injection anistreplase 30 u	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0360	Hydralazine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0380	Inj metaraminol bitartrate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0390	Chloroquine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0395	Arbutamine HCl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0456	Azithromycin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0460	Atropine sulfate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0470	Dimecaprol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D

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HPCPS
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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
J0475	Baclofen 10 MG injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0476	Baclofen intrathecal trial	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0500	Dicyclomine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0515	Inj benzotropine mesylate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0520	Bethanechol chloride inject	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0530	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0540	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0550	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0560	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0570	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0580	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0583	Bivalirudin	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J0585	Botulinum toxin a per unit	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0587	Botulinum toxin type B	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0592	Buprenorphine hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0595	Butorphanol tartrate 1 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0600	Edetate calcium disodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0610	Calcium gluconate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0620	Calcium glycer & lact/10 ML	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0630	Calcitonin salmon injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0636	Inj calcitriol per 0.1 mcg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J0637	Caspofungin acetate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0640	Leucovorin calcium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0670	Inj mepivacaine HCL/10 ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0690	Cefazolin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0692	Cefepime HCl for injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0694	Cefoxitin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0696	Ceftriaxone sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0697	Sterile cefuroxime injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0698	Cefotaxime sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0702	Betamethasone acet&sod phosp	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0704	Betamethasone sod phosp/4 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0706	Caffeine citrate injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J0710	Cephapirin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0713	Inj ceftazidime per 500 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0715	Ceftizoxime sodium / 500 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0720	Chloramphenicol sodium injec	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0725	Chorionic gonadotropin/10u	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
J0735	Clonidine hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0740	Cidofovir injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0743	Cilastatin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0744	Ciprofloxacin iv	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0745	Inj codeine phosphate /30 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0760	Colchicine injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J0770	Colistimethate sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0780	Prochlorperazine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0800	Corticotropin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0835	Inj cosyntropin per 0.25 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0850	Cytomegalovirus imm IV /vial	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0880	Darbepoetin alfa injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J0895	Deferoxamine mesylate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0900	Testosterone enanthate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0945	Brompheniramine maleate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J0970	Estradiol valerate injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1000	Depo-estradiol cypionate inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1020	Methylprednisolone 20 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1030	Methylprednisolone 40 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1040	Methylprednisolone 80 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1051	Medroxyprogesterone inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1055	Medrxpyrogeste acetate inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1056	MA/EC contraceptiveinjection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1060	Testosterone cypionate 1 ML	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1070	Testosterone cypionat 100 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1080	Testosterone cypionat 200 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1094	Inj dexamethasone acetate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1100	Dexamethasone sodium phos	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1110	Inj dihydroergotamine mesylt	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1120	Acetazolamid sodium injectio	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1160	Digoxin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1165	Phenytoin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1170	Hydromorphone injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1180	Dyphylline injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1190	Dexrazoxane HCl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1200	Diphenhydramine hcl injectio	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1205	Chlorothiazide sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1212	Dimethyl sulfoxide 50% 50 ML	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D

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HPCPS		DOLLAR VALUE		MODIFIERS												LIC
CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
J1230	Methadone injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1240	Dimenhydrinate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1245	Dipyridamole injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1250	Inj dobutamine HCL/250 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1260	Dolasetron mesylate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1270	Injection, doxercalciferol	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1320	Amitriptyline injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1325	Epoprostenol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1327	Eptifibatide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1330	Ergonovine maleate injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1335	Ertapenem injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1364	Erythro lactobionate /500 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1380	Estradiol valerate 10 MG inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1390	Estradiol valerate 20 MG inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1410	Inj estrogen conjugate 25 MG	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1435	Injection estrone per 1 MG	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1436	Etidronate disodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1438	Etanercept injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1440	Filgrastim 300 mcg injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1441	Filgrastim 480 mcg injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1450	Fluconazole	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1452	Intraocular Fomivirsen na	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1455	Foscarnet sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1460	Gamma globulin 1 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1470	Gamma globulin 2 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1480	Gamma globulin 3 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1490	Gamma globulin 4 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1500	Gamma globulin 5 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1510	Gamma globulin 6 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1520	Gamma globulin 7 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1530	Gamma globulin 8 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1540	Gamma globulin 9 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1550	Gamma globulin 10 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1560	Gamma globulin > 10 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1563	IV immune globulin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1564	Immune globulin 10 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1565	RSV-ivig	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1570	Ganciclovir sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D

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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
J1580	Garamycin gentamicin inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1590	Gatifloxacin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1595	Injection glatiramer acetate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1600	Gold sodium thiomaleate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1610	Glucagon hydrochloride/1 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1620	Gonadorelin hydroch/ 100 mcg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1626	Granisetron HCl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1630	Haloperidol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1631	Haloperidol decanoate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1642	Inj heparin sodium per 10 u	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1644	Inj heparin sodium per 10u	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1645	Dalteparin sodium	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1650	Inj enoxaparin sodium	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1652	Fondaparinux sodium	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1655	Tinzaparin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1670	Tetanus immune globulin inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1700	Hydrocortisone acetate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1710	Hydrocortisone sodium ph inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1720	Hydrocortisone sodium succ i	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1730	Diazoxide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1742	Ibutilide fumarate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1745	Infliximab injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1750	Iron dextran	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1756	Iron sucrose injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1785	Injection imiglucerase /unit	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1790	Droperidol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1800	Propranolol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1815	Insulin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1817	Insulin for insulin pump use	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1825	Interferon beta-1a	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1830	Interferon beta-1b / .25 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1835	Itraconazole injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1840	Kanamycin sulfate 500 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1850	Kanamycin sulfate 75 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1885	Ketorolac tromethamine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1890	Cephalothin sodium injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J1940	Furosemide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1950	Leuprolide acetate /3.75 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D

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HPCPS
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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
J1955	Inj levocarnitine per 1 gm	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1956	Levofloxacin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1960	Levorphanol tartrate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1980	Hyoscyamine sulfate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J1990	Chlordiazepoxide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2001	Lidocaine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2010	Lincomycin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2020	Linezolid injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2060	Lorazepam injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2150	Mannitol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2175	Meperidine hydrochl /100 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2180	Meperidine/promethazine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2185	Meropenem	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2210	Methylegonovin maleate inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J2250	Inj midazolam hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2260	Inj milrinone lactate / 5 ML	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2270	Morphine sulfate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2271	Morphine so4 injection 100mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J2275	Morphine sulfate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2280	Inj, moxifloxacin 100 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2300	Inj nalbuphine hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2310	Inj naloxone hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2320	Nandrolone decanoate 50 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2321	Nandrolone decanoate 100 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2322	Nandrolone decanoate 200 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2324	Nesiritide	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J2353	Octreotide injection, depot	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2354	Octreotide inj, non-depot	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2355	Oprelvekin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2360	Orphenadrine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2370	Phenylephrine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2400	Chloroprocaine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2405	Ondansetron hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2410	Oxymorphone hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2430	Pamidronate disodium /30 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2440	Papaverin hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2460	Oxytetracycline injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2501	Paricalcitol	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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HCPCS
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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
J2505	Injection, pegfilgrastim 6mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J2510	Penicillin g procaine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2515	Pentobarbital sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2540	Penicillin g potassium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2543	Piperacillin/tazobactam	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2545	Pentamidine isethionate/300mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2550	Promethazine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2560	Phenobarbital sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2590	Oxytocin injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J2597	Inj desmopressin acetate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2650	Prednisolone acetate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2670	Totazoline hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2675	Inj progesterone per 50 MG	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J2680	Fluphenazine decanoate 25 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2690	Procainamide hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2700	Oxacillin sodium injecton	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2710	Neostigmine methylsifte inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2720	Inj protamine sulfate/10 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2725	Inj protirelin per 250 mcg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2730	Pralidoxime chloride inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2760	Phentolaine mesylate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2765	Metoclopramide hcl injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J2770	Quinupristin/dalfopristin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2780	Ranitidine hydrochloride inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2783	Rasburicase	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J2788	Rho d immune globulin 50 mcg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2790	Rho d immune globulin inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2792	Rho(D) immune globulin h, sd	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2795	Ropivacaine HCl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2800	Methocarbamol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2810	Inj theophylline per 40 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2820	Sargramostim injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2910	Aurothioglucose injecton	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2912	Sodium chloride injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2916	Na ferric gluconate complex	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2920	Methylprednisolone injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2930	Methylprednisolone injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J2940	Somatrem injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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HPCPS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
J2941	Somatropin injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J2950	Promazine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J2993	Reteplase injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J2995	Inj streptokinase /2500 IU	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J2997	Alteplase recombinant	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3000	Streptomycin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3010	Fentanyl citrate injeciton	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3030	Sumatriptan succinate / 6 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3070	Pentazocine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3100	Tenecteplase injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3105	Terbutaline sulfate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3120	Testosterone enanthate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3130	Testosterone enanthate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3140	Testosterone suspension inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3150	Testosteron propionate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3230	Chlorpromazine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3240	Thyrotropin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3245	Tirofiban hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3250	Trimethobenzamide hcl inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3260	Tobramycin sulfate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3265	Injection torsemide 10 mg/ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3280	Thiethylperazine maleate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3301	Triamcinolone acetonide inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3302	Triamcinolone diacetate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3303	Triamcinolone hexacetoni inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3305	Inj trimetrexate glucuronate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3310	Perphenazine injeciton	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3315	Triptorelin pamoate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J3320	Spectinomycn di-hcl inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3350	Urea injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3360	Diazepam injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3364	Urokinase 50 IU injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J3365	Urokinase 250,0 IU inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3370	Vancomycin hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3395	Verteporfin injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J3400	Triflupromazine hcl inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3410	Hydroxyzine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J3411	Thiamine hcl 100 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	

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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
J3415	Pyridoxine hcl 100 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3420	Vitamin b12 injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3430	Vitamin k phytonadione inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3465	Injection, voriconazole	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3470	Hyaluronidase injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3475	Inj magnesium sulfate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3480	Inj potassium chloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3485	Zidovudine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3486	Ziprasidone mesylate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3487	Zoledronic acid	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3490	Drugs unclassified injection	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J3520	Edetate disodium per 150 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J3530	Nasal vaccine inhalation	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J3535	Metered dose inhaler drug	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J3570	Laetrile amygdalin vit B17	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J3590	Unclassified biologics	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7030	Normal saline solution infus	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7040	Normal saline solution infus	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7042	5% dextrose/normal saline	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7050	Normal saline solution infus	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7051	Sterile saline/water	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7060	5% dextrose/water	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7070	D5w infusion	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7100	Dextran 40 infusion	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7110	Dextran 75 infusion	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7120	Ringers lactate infusion	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7130	Hypertonic saline solution	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7190	Factor viii	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7191	Factor VIII (porcine)	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7192	Factor viii recombinant	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7193	Factor IX non-recombinant	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7194	Factor ix complex	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7195	Factor IX recombinant	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7197	Antithrombin iii injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7198	Anti-inhibitor	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7199	Hemophilia clot factor noc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7300	Intraut copper contraceptive	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7302	Levonorgestrel iu contracept	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
J7303	Contraceptive vaginal ring	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7308	Aminolevulinic acid hcl top	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7310	Ganciclovir long act implant	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7317	Sodium hyaluronate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7320	Hylan G-F 20 injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7330	Cultured chondrocytes implnt	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7340	Metabolic active D/E tissue	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7342	Metabolically active tissue	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7350	Injectable human tissue	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7500	Azathioprine oral 50mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7501	Azathioprine parenteral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7502	Cyclosporine oral 100 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7504	Lymphocyte immune globulin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7505	Monoclonal antibodies	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7506	Prednisone oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7507	Tacrolimus oral per 1 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7509	Methylprednisolone oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7510	Prednisolone oral per 5 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7511	Antithymocyte globuln rabbit	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7513	Daclizumab, parenteral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7515	Cyclosporine oral 25 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7516	Cyclosporin parenteral 250mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7517	Mycophenolate mofetil oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7520	Sirolimus, oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7525	Tacrolimus injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7599	Immunosuppressive drug noc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7608	Acetylcysteine inh sol u d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7618	Albuterol inh sol con	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7619	Albuterol inh sol u d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7621	(Levo)albuterol/lpra-bromide	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7622	Beclomethasone inhalatn sol	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7624	Betamethasone inhalation sol	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7626	Budesonide inhalation sol	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7628	Bitolterol mes inhal sol con	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7629	Bitolterol mes inh sol u d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7631	Cromolyn sodium inh sol u d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7633	Budesonide concentrated sol	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7635	Atropine inhal sol con	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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J7636	Atropine inhal sol unit dose	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7637	Dexamethasone inhal sol con	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7638	Dexamethasone inhal sol u d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7639	Dornase alpha inhal sol u d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7641	Flunisolide, inhalation sol	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7642	Glycopyrrolate inhal sol con	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7643	Glycopyrrolate inhal sol u d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7644	Ipratropium brom inh sol u d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7648	Isoetharine hcl inh sol con	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7649	Isoetharine hcl inh sol u d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7658	Isoproterenolhcl inh sol con	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7659	Isoproterenol hcl inh sol ud	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7668	Metaproterenol inh sol con	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7669	Metaproterenol inh sol u d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J7680	Terbutaline so4 inh sol con	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7681	Terbutaline so4 inh sol u d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7682	Tobramycin inhalation sol	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J7683	Triamcinolone inh sol con	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7684	Triamcinolone inh sol u d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7699	Inhalation solution for DME	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J7799	Non-inhalation drug for DME	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J8499	Oral prescrip drug non chemo	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J8510	Oral busulfan	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J8520	Capecitabine, oral, 150 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J8521	Capecitabine, oral, 500 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J8530	Cyclophosphamide oral 25 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J8560	Etoposide oral 50 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J8600	Melphalan oral 2 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J8610	Methotrexate oral 2.5 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J8700	Temozolmide	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J8999	Oral prescription drug chemo	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
J9000	Doxorubic hcl 10 MG vl chemo	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9001	Doxorubicin hcl liposome inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9010	Alemtuzumab injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J9015	Aldesleukin/single use vial	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9017	Arsenic trioxide	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9020	Asparaginase injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9031	Bcg live intravesical vac	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D

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J9040	Bleomycin sulfate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9045	Carboplatin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9050	Carmus bischl nitro inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9060	Cisplatin 10 MG injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9062	Cisplatin 50 MG injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9065	Inj cladribine per 1 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9070	Cyclophosphamide 100 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9080	Cyclophosphamide 200 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9090	Cyclophosphamide 500 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9091	Cyclophosphamide 1.0 grm inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9092	Cyclophosphamide 2.0 grm inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9093	Cyclophosphamide lyophilized	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9094	Cyclophosphamide lyophilized	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9095	Cyclophosphamide lyophilized	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9096	Cyclophosphamide lyophilized	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9097	Cyclophosphamide lyophilized	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9098	Cytarabine liposome	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9100	Cytarabine hcl 100 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9110	Cytarabine hcl 500 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9120	Dactinomycin actinomycin d	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9130	Dacarbazine 10 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9140	Dacarbazine 200 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9150	Daunorubicin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9151	Daunorubicin citrate liposom	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9160	Denileukin diftitox, 300 mcg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9165	Diethylstilbestrol injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J9170	Docetaxel	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9178	Inj, epirubicin hcl, 2 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9181	Etoposide 10 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9182	Etoposide 100 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9185	Fludarabine phosphate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9190	Fluorouracil injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9200	Floxuridine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9201	Gemcitabine HCl	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9202	Goserelin acetate implant	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9206	Irinotecan injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9208	Ifosfomide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9209	Mesna injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D

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J9211	Idarubicin hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9212	Interferon alfacon-1	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9213	Interferon alfa-2a inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9214	Interferon alfa-2b inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9215	Interferon alfa-n3 inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9216	Interferon gamma 1-b inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9217	Leuprolide acetate suspnsion	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9218	Leuprolide acetate injecton	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9219	Leuprolide acetate implant	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J9230	Mechlorethamine hcl inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9245	Inj melphalan hydrochl 50 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9250	Methotrexate sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9260	Methotrexate sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9263	Oxaliplatin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9265	Paclitaxel injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9266	Pegaspargase/singl dose vial	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9268	Pentostatin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9270	Plicamycin (mithramycin) inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9280	Mitomycin 5 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9290	Mitomycin 20 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9291	Mitomycin 40 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9293	Mitoxantrone hydrochl / 5 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9300	Gemtuzumab ozogamicin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9310	Rituximab cancer treatment	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9320	Streptozocin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9340	Thiotepa injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9350	Topotecan	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9355	Trastuzumab	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9357	Valrubicin, 200 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9360	Vinblastine sulfate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9370	Vincristine sulfate 1 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9375	Vincristine sulfate 2 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9380	Vincristine sulfate 5 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9390	Vinorelbine tartrate/10 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9395	Injection, Fulvestrant	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
J9600	Porfimer sodium	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
J9999	Chemotherapy drug	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
K0001	Standard wheelchair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N

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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
K0002	Stnd hemi (low seat) whlchr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0003	Lightweight wheelchair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0004	High strength ltwt whlchr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0005	Ultralightweight wheelchair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0006	Heavy duty wheelchair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0007	Extra heavy duty wheelchair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0009	Other manual wheelchair/base	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0010	Stnd wt frame power whlchr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0011	Stnd wt pwr whlchr w control	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0012	Ltwt portbl power whlchr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0014	Other power whlchr base	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0015	Detach non-adjus hght armrst	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0017	Detach adjust armrest base	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0018	Detach adjust armrst upper	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0019	Arm pad each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0020	Fixed adjust armrest pair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0023	Planr back insrt foam w/strp	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0024	Plnr back insrt foam w/hrdwr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0037	High mount flip-up footrest	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0038	Leg strap each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0039	Leg strap h style each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0040	Adjustable angle footplate	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0041	Large size footplate each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0042	Standard size footplate each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0043	Ftrst lower extension tube	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0044	Ftrst upper hanger bracket	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0045	Footrest complete assembly	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0046	Elevat legrst low extension	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0047	Elevat legrst up hangr brack	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0050	Ratchet assembly	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0051	Cam relese assem frst/lgrst	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0052	Swingaway detach footrest	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0053	Elevate footrest articulate	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0056	Seat ht <17 or >=21 ltwt wc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0059	Plastic coated handrim each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0060	Steel handrim each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0061	Aluminum handrim each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
K0064	Zero pressure tube flat free	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N

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HCPCS
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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS												LIC REQ	
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI			
K0065	Spoke protectors	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0066	Solid tire any size each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0067	Pneumatic tire any size each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0068	Pneumatic tire tube each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0069	Rear whl complete solid tire	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0070	Rear whl compl pneum tire	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0071	Front castr compl pneum tire	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0072	Frnt cstr cmpl sem-pneum tir	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0073	Caster pin lock each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0074	Pneumatic caster tire each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0075	Semi-pneumatic caster tire	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0076	Solid caster tire each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0077	Front caster assem complete	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0078	Pneumatic caster tire tube	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0081	Wheel lock assembly complete	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0090	Rear tire power wheelchair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0091	Rear tire tube power whlchr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0092	Rear assem cmplt powr whlchr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0093	Rear zero pressure tire tube	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0094	Wheel tire for power base	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0095	Wheel tire tube each base	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0096	Wheel assem powr base complt	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0097	Wheel zero presure tire tube	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0098	Drive belt power wheelchair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0099	Pwr wheelchair front caster	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0102	Crutch and cane holder	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0104	Cylinder tank carrier	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0105	Iv hanger	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0106	Arm trough each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0108	W/c component-accessory NOS	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0114	Whlchr back suprt inr frame	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0115	Back module orthotic system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0116	Back & seat modul orthot sys	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0195	Elevating whlchair leg rests	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0415	RX antiemetic drg, oral NOS	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0416	Rx antiemetic drg,rectal NOS	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0452	Wheelchair bearings	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0455	Pump uninterrupted infusion	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
K0462	Temporary replacement eqpmnt	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0552	External infusion pump suppl	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0600	Functional neruomuscularstim	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0601	Repl batt silver oxide 1.5 v	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0602	Repl batt silver oxide 3 v	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0603	Repl batt alkaline 1.5 v	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0604	Repl batt lithium 3.6 v	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0605	Repl batt lithium 4.5 v	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0606	AED garment w elec analysis	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
K0607	Repl batt for AED	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
K0608	Repl garment for AED	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
K0609	Repl electrode for AED	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
K0618	TLSO 2 piece rigid shell	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0619	TLSO 3 piece rigid shell	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
K0620	Tubular elastic dressing	Bundled	Bundled	0	0%	0%	0%	9	0	0	0	0	0		B	
K0627	Cervical pneum trac equip	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
K0628	Mult dens insert direct form	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
K0629	Mult dens insert custom mold	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
K0630	SIO flex pelvisacral prefab	\$164.03	\$164.03	0	0%	0%	0%	0	0	0	0	0	0		F	
K0631	SIO flex pelvisacral custom	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
K0632	SIO panel prefab	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
K0633	SIO panel custom	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
K0634	LO flexible L1 – below L5 pre	\$164.03	\$164.03	0	0%	0%	0%	0	0	0	0	0	0		F	
K0635	LO sag stays/panels pre-fab	\$288.52	\$288.52	0	0%	0%	0%	0	0	0	0	0	0		F	
K0636	LO sagitt rigid panel prefab	\$288.52	\$288.52	0	0%	0%	0%	0	0	0	0	0	0		F	
K0637	LO flex w/o rigid stays pre	\$164.03	\$164.03	0	0%	0%	0%	0	0	0	0	0	0		F	
K0638	LSO flex w/rigid stays cust	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
K0639	LSO post rigid panel pre	\$288.52	\$288.52	0	0%	0%	0%	0	0	0	0	0	0		F	
K0640	LSO sag-coro rigid frame pre	\$447.55	\$447.55	0	0%	0%	0%	0	0	0	0	0	0		F	
K0641	LSO sag-cor rigid frame cust	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
K0642	LSO flexion control prefab	\$1,064.35	\$1,064.35	0	0%	0%	0%	0	0	0	0	0	0		F	
K0643	LSO flexion control custom	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
K0644	LSO sagit rigid panel prefab	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
K0645	LSO sagittal rigid panel cus	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
K0646	LSO sag-coronal panel prefab	\$1,064.35	\$1,064.35	0	0%	0%	0%	0	0	0	0	0	0		F	
K0647	LSO sag-coronal panel custom	\$1,462.17	\$1,462.17	0	0%	0%	0%	0	0	0	0	0	0		F	Y
K0648	LSO S/C shell/panel prefab	\$1,064.35	\$1,064.35	0	0%	0%	0%	0	0	0	0	0	0		F	
K0649	LSO S/C shell/panel custom	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI			
K0650	Gen w/c cushion width < 22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0651	Gen w/c cushion width > 22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0652	Skin protect w/c cus wd <22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0653	Skin protect w/c cus wd <22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0654	Position w/c cush width <22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0655	Position w/c cush width >22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0656	Skin pro/pos w/c cus wd>=22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0657	Skin pro/pos w/c cus wd <22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0658	Custom fabricate w/c cushion	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0659	Powered w/c cushion	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0660	Gen use back cush width <22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0661	Gen use back cush width >22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0662	Position back cush wdth <22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0663	Position back cush width >22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0664	Pos back post/lat width <22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0665	Pos back post/lat width >22"	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0666	Custom fab w/c back cushion	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0667	Mt hardwre man/light pwr w/c	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0668	Rep ace cover w/c seat cush	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
K0669	W/c seat/back no CVR SADMERC	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N		
L0100	Cranial orthosis/helmet mold	\$525.08	\$525.08	0	0%	0%	0%	0	0	0	0	0	0		F	Y		
L0110	Cranial orthosis/helmet nonm	\$141.34	\$141.34	0	0%	0%	0%	0	0	0	0	0	0		F			
L0112	Cranial cervical orthosis	\$1,325.40	\$1,325.40	0	0%	0%	0%	0	0	0	0	0	0		F			
L0120	Cerv flexible non-adjustable	\$32.09	\$32.09	0	0%	0%	0%	0	0	0	0	0	0		F			
L0130	Flex thermoplastic collar mo	\$178.58	\$178.58	0	0%	0%	0%	0	0	0	0	0	0		F	Y		
L0140	Cervical semi-rigid adjustab	\$77.43	\$77.43	0	0%	0%	0%	0	0	0	0	0	0		F			
L0150	Cerv semi-rig adj molded chn	\$103.13	\$103.13	0	0%	0%	0%	0	0	0	0	0	0		F			
L0160	Cerv semi-rig wire occ/mand	\$142.09	\$142.09	0	0%	0%	0%	0	0	0	0	0	0		F			
L0170	Cervical collar molded to pt	\$689.21	\$689.21	0	0%	0%	0%	0	0	0	0	0	0		F	Y		
L0172	Cerv col thermplas foam 2 pi	\$124.38	\$124.38	0	0%	0%	0%	0	0	0	0	0	0		F			
L0174	Cerv col foam 2 piece w thor	\$261.88	\$261.88	0	0%	0%	0%	0	0	0	0	0	0		F			
L0180	Cer post col occ/man sup adj	\$381.84	\$381.84	0	0%	0%	0%	0	0	0	0	0	0		F			
L0190	Cerv collar supp adj cerv ba	\$537.21	\$537.21	0	0%	0%	0%	0	0	0	0	0	0		F			
L0200	Cerv col supp adj bar & thor	\$599.86	\$599.86	0	0%	0%	0%	0	0	0	0	0	0		F			
L0210	Thoracic rib belt	\$40.17	\$40.17	0	0%	0%	0%	0	0	0	0	0	0		F			
L0220	Thor rib belt custom fabrica	\$119.53	\$119.53	0	0%	0%	0%	0	0	0	0	0	0		F			
L0450	TLSO flex prefab thoracic	\$208.22	\$208.22	0	0%	0%	0%	0	0	0	0	0	0		F			
L0452	tlso flex custom fab thoraci	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N			

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE		
L0454	TLSO flex prefab sacrococ-T9	\$328.43	\$328.43	0	0%	0%	0%	0	0	0	0	0	0		F	
L0456	TLSO flex prefab	\$941.84	\$941.84	0	0%	0%	0%	0	0	0	0	0	0		F	
L0458	TLSO 2Mod symphis-xipho pre	\$844.54	\$844.54	0	0%	0%	0%	0	0	0	0	0	0		F	
L0460	TLSO2Mod symphysis-stern pre	\$950.57	\$950.57	0	0%	0%	0%	0	0	0	0	0	0		F	
L0462	TLSO 3Mod sacro-scap pre	\$1,182.36	\$1,182.36	0	0%	0%	0%	0	0	0	0	0	0		F	
L0464	TLSO 4Mod sacro-scap pre	\$1,407.59	\$1,407.59	0	0%	0%	0%	0	0	0	0	0	0		F	
L0466	TLSO rigid frame pre soft ap	\$428.01	\$428.01	0	0%	0%	0%	0	0	0	0	0	0		F	
L0468	TLSO rigid frame prefab pelv	\$513.75	\$513.75	0	0%	0%	0%	0	0	0	0	0	0		F	
L0470	TLSO rigid frame pre subclav	\$616.63	\$616.63	0	0%	0%	0%	0	0	0	0	0	0		F	
L0472	TLSO rigid frame hyperex pre	\$437.89	\$437.89	0	0%	0%	0%	0	0	0	0	0	0		F	
L0476	TLSO flexion compres jac pre	\$1,000.65	\$1,000.65	0	0%	0%	0%	0	0	0	0	0	0		F	
L0478	TLSO flexion compres jac cus	\$1,304.71	\$1,304.71	0	0%	0%	0%	0	0	0	0	0	0		F	
L0480	TLSO rigid plastic custom fa	\$1,509.90	\$1,509.90	0	0%	0%	0%	0	0	0	0	0	0		F	
L0482	TLSO rigid lined custom fab	\$1,538.82	\$1,538.82	0	0%	0%	0%	0	0	0	0	0	0		F	
L0484	TLSO rigid plastic cust fab	\$1,612.20	\$1,612.20	0	0%	0%	0%	0	0	0	0	0	0		F	
L0486	TLSO rigidlined cust fab two	\$1,100.26	\$1,100.26	0	0%	0%	0%	0	0	0	0	0	0		F	
L0488	TLSO rigid lined pre one pie	\$950.57	\$950.57	0	0%	0%	0%	0	0	0	0	0	0		F	
L0490	TLSO rigid plastic pre one	\$267.88	\$267.88	0	0%	0%	0%	0	0	0	0	0	0		F	
L0500	Lso flex surgical support	\$164.03	\$164.03	0	0%	0%	0%	0	0	0	0	0	0		F	
L0510	Lso flexible custom fabricat	\$308.44	\$308.44	0	0%	0%	0%	0	0	0	0	0	0		F	
L0515	Lso flex elas w/ rig post pa	\$288.52	\$288.52	0	0%	0%	0%	0	0	0	0	0	0		F	
L0520	Lso a-p-l control with apron	\$447.55	\$447.55	0	0%	0%	0%	0	0	0	0	0	0		F	
L0530	Lso ant-pos control w apron	\$437.66	\$437.66	0	0%	0%	0%	0	0	0	0	0	0		F	
L0540	Lso lumbar flexion a-p-l	\$447.29	\$447.29	0	0%	0%	0%	0	0	0	0	0	0		F	
L0550	Lso a-p-l control molded	\$1,273.00	\$1,273.00	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0560	Lso a-p-l w interface	\$1,462.17	\$1,462.17	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0561	Prefab Iso	\$326.89	\$326.89	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0565	Lso a-p-l control custom	\$1,064.35	\$1,064.35	0	0%	0%	0%	0	0	0	0	0	0		F	
L0600	Sacroiliac flex surg support	\$109.63	\$109.63	0	0%	0%	0%	0	0	0	0	0	0		F	
L0610	Sacroiliac flexible custm fa	\$290.97	\$290.97	0	0%	0%	0%	0	0	0	0	0	0		F	
L0620	Sacroiliac semi-rig w apron	\$384.41	\$384.41	0	0%	0%	0%	0	0	0	0	0	0		F	
L0700	Ctlso a-p-l control molded	\$1,834.07	\$1,834.07	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0710	Ctlso a-p-l control w/ inter	\$2,071.55	\$2,071.55	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0810	Halo cervical into jckt vest	\$2,494.31	\$2,494.31	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0820	Halo cervical into body jack	\$2,449.61	\$2,449.61	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0830	Halo cerv into milwaukee typ	\$3,435.91	\$3,435.91	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0860	Magnetic resonanc image comp	\$1,105.17	\$1,105.17	0	0%	0%	0%	0	0	0	0	0	0		F Y	
L0861	Addition to halo procedure	\$204.11	\$204.11	0	0%	0%	0%	0	0	0	0	0	0		F	

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS										ENDO BASE		FSI		LIC REQ	
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)							
L0960	Post surgical support pads	\$64.71	\$64.71	0	0%	0%	0%	0	0	0	0	0	0			F				
L0970	Tlso corset front	\$103.68	\$103.68	0	0%	0%	0%	0	0	0	0	0	0			F				
L0972	Lso corset front	\$93.36	\$93.36	0	0%	0%	0%	0	0	0	0	0	0			F				
L0974	Tlso full corset	\$168.05	\$168.05	0	0%	0%	0%	0	0	0	0	0	0			F				
L0976	Lso full corset	\$177.59	\$177.59	0	0%	0%	0%	0	0	0	0	0	0			F				
L0978	Axillary crutch extension	\$186.15	\$186.15	0	0%	0%	0%	0	0	0	0	0	0			F				
L0980	Peroneal straps pair	\$16.85	\$16.85	0	0%	0%	0%	0	0	0	0	0	0			F				
L0982	Stocking supp grips set of f	\$15.72	\$15.72	0	0%	0%	0%	0	0	0	0	0	0			F				
L0984	Protective body sock each	\$62.02	\$62.02	0	0%	0%	0%	0	0	0	0	0	0			F				
L0999	Add to spinal orthosis NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N				
L1000	Ctlso milwaukee initial model	\$2,205.92	\$2,205.92	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1005	Tension based scoliosis orth	\$3,030.89	\$3,030.89	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1010	Ctlso axilla sling	\$63.15	\$63.15	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1020	Kyphosis pad	\$92.59	\$92.59	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1025	Kyphosis pad floating	\$113.13	\$113.13	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1030	Lumbar bolster pad	\$59.28	\$59.28	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1040	Lumbar or lumbar rib pad	\$87.54	\$87.54	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1050	Sternal pad	\$92.98	\$92.98	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1060	Thoracic pad	\$102.23	\$102.23	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1070	Trapezius sling	\$92.39	\$92.39	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1080	Outrigger	\$57.11	\$57.11	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1085	Outrigger bil w/ vert extens	\$149.09	\$149.09	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1090	Lumbar sling	\$90.16	\$90.16	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1100	Ring flange plastic/leather	\$163.85	\$163.85	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1110	Ring flange plas/leather mol	\$271.15	\$271.15	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1120	Covers for upright each	\$44.59	\$44.59	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1200	Furnsh initial orthosis only	\$1,895.21	\$1,895.21	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1210	Lateral thoracic extension	\$237.38	\$237.38	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1220	Anterior thoracic extension	\$245.86	\$245.86	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1230	Milwaukee type superstructur	\$515.70	\$515.70	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1240	Lumbar derotation pad	\$75.29	\$75.29	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1250	Anterior asis pad	\$68.86	\$68.86	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1260	Anterior thoracic derotation	\$72.70	\$72.70	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1270	Abdominal pad	\$70.28	\$70.28	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1280	Rib gusset (elastic) each	\$81.42	\$81.42	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1290	Lateral trochanteric pad	\$72.84	\$72.84	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1300	Body jacket mold to patient	\$1,532.51	\$1,532.51	0	0%	0%	0%	0	0	0	0	0	0			F	Y			
L1310	Post-operative body jacket	\$1,716.52	\$1,716.52	0	0%	0%	0%	0	0	0	0	0	0			F	Y			

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CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
L1499	Spinal orthosis NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L1500	Thkao mobility frame	\$2,012.83	\$2,012.83	0	0%	0%	0%	0	0	0	0	0	0		F	
L1510	Thkao standing frame	\$1,282.22	\$1,282.22	0	0%	0%	0%	0	0	0	0	0	0		F	
L1520	Thkao swivel walker	\$2,503.06	\$2,503.06	0	0%	0%	0%	0	0	0	0	0	0		F	
L1600	Abduct hip flex frejka w cvr	\$116.90	\$116.90	0	0%	0%	0%	0	0	0	0	0	0		F	
L1610	Abduct hip flex frejka covr	\$39.83	\$39.83	0	0%	0%	0%	0	0	0	0	0	0		F	
L1620	Abduct hip flex pavlik harne	\$128.06	\$128.06	0	0%	0%	0%	0	0	0	0	0	0		F	
L1630	Abduct control hip semi-flex	\$166.03	\$166.03	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1640	Pelv band/spread bar thigh c	\$437.92	\$437.92	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1650	HO abduction hip adjustable	\$210.04	\$210.04	0	0%	0%	0%	0	0	0	0	0	0		F	
L1652	HO bi thighcuffs w sprdr bar	\$337.57	\$337.57	0	0%	0%	0%	0	0	0	0	0	0		F	
L1660	HO abduction static plastic	\$168.25	\$168.25	0	0%	0%	0%	0	0	0	0	0	0		F	
L1680	Pelvic & hip control thigh c	\$1,473.79	\$1,473.79	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1685	Post-op hip abduct custom fa	\$1,079.09	\$1,079.09	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1686	HO post-op hip abduction	\$839.14	\$839.14	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1690	Combination bilateral HO	\$1,831.18	\$1,831.18	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1700	Leg perthes orth toronto typ	\$1,489.96	\$1,489.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1710	Legg perthes orth newington	\$1,802.71	\$1,802.71	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1720	Legg perthes orthosis trilat	\$1,257.55	\$1,257.55	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1730	Legg perthes orth scottish r	\$1,072.97	\$1,072.97	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1750	Legg perthes sling	\$178.48	\$178.48	0	0%	0%	0%	0	0	0	0	0	0		F	
L1755	Legg perthes patten bottom t	\$1,436.31	\$1,436.31	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1800	Knee orthoses elas w stays	\$61.26	\$61.26	0	0%	0%	0%	0	0	0	0	0	0		F	
L1810	Ko elastic with joints	\$103.43	\$103.43	0	0%	0%	0%	0	0	0	0	0	0		F	
L1815	Elastic with condylar pads	\$106.63	\$106.63	0	0%	0%	0%	0	0	0	0	0	0		F	
L1820	Ko elas w/ condyle pads & jo	\$130.86	\$130.86	0	0%	0%	0%	0	0	0	0	0	0		F	
L1825	Ko elastic knee cap	\$58.27	\$58.27	0	0%	0%	0%	0	0	0	0	0	0		F	
L1830	Ko immobilizer canvas longit	\$101.43	\$101.43	0	0%	0%	0%	0	0	0	0	0	0		F	
L1831	Knee orthosis, locking	\$278.71	\$278.71	0	0%	0%	0%	0	0	0	0	0	0		F	
L1832	KO adj jnt pos rigid support	\$551.54	\$551.54	0	0%	0%	0%	0	0	0	0	0	0		F	
L1834	Ko w/0 joint rigid molded to	\$704.21	\$704.21	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1836	Rigid KO wo joints	\$126.35	\$126.35	0	0%	0%	0%	0	0	0	0	0	0		F	
L1840	Ko derot ant cruciate custom	\$964.90	\$964.90	0	0%	0%	0%	0	0	0	0	0	0		F	
L1843	KO single upright custom fit	\$849.67	\$849.67	0	0%	0%	0%	0	0	0	0	0	0		F	
L1844	Ko w/adj jt rot cntrl molded	\$1,908.66	\$1,908.66	0	0%	0%	0%	0	0	0	0	0	0		F	
L1845	Ko w/ adj flex/ext rotat cus	\$770.07	\$770.07	0	0%	0%	0%	0	0	0	0	0	0		F	
L1846	Ko w adj flex/ext rotat mold	\$1,196.27	\$1,196.27	0	0%	0%	0%	0	0	0	0	0	0		F	
L1847	KO adjustable w air chambers	\$544.66	\$544.66	0	0%	0%	0%	0	0	0	0	0	0		F	

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L1850	Ko swedish type	\$291.60	\$291.60	0	0%	0%	0%	0	0	0	0	0	0		F	
L1855	Ko plas doub upright jnt mol	\$1,041.32	\$1,041.32	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1858	Ko polycentric pneumatic pad	\$1,204.68	\$1,204.68	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1860	Ko supracondylar socket mold	\$1,190.20	\$1,190.20	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1870	Ko doub upright lacers molde	\$1,056.05	\$1,056.05	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1880	Ko doub upright cuffs/lacers	\$856.15	\$856.15	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1900	Afo sprng wir drsflx calf bd	\$269.81	\$269.81	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1901	Prefab ankle orthosis	\$16.76	\$16.76	0	0%	0%	0%	0	0	0	0	0	0		F	
L1902	Afo ankle gauntlet	\$88.80	\$88.80	0	0%	0%	0%	0	0	0	0	0	0		F	
L1904	Afo molded ankle gauntlet	\$426.60	\$426.60	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1906	Afo multiligamentous ankle su	\$109.10	\$109.10	0	0%	0%	0%	0	0	0	0	0	0		F	
L1907	AFO, supramalleolar with straps	\$532.85	\$532.85	0	0%	0%	0%	0	0	0	0	0	0		F	
L1910	Afo sing bar clasp attach sh	\$306.87	\$306.87	0	0%	0%	0%	0	0	0	0	0	0		F	
L1920	Afo sing upright w/ adjust s	\$406.50	\$406.50	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1930	Afo plastic	\$250.64	\$250.64	0	0%	0%	0%	0	0	0	0	0	0		F	
L1940	Afo molded to patient plasti	\$481.96	\$481.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1945	Afo molded plas rig ant tib	\$947.63	\$947.63	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1950	Afo spiral molded to pt plas	\$900.95	\$900.95	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1951	Ankle foot orthosis, spiral	\$795.30	\$795.30	0	0%	0%	0%	0	0	0	0	0	0		F	
L1960	Afo pos solid ank plastic mo	\$502.84	\$502.84	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1970	Afo plastic molded w/ankle j	\$671.06	\$671.06	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1971	Ankle foot orthosis	\$443.86	\$443.86	0	0%	0%	0%	0	0	0	0	0	0		F	
L1980	Afo sing solid stirrup calf	\$425.82	\$425.82	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L1990	Afo doub solid stirrup calf	\$514.53	\$514.53	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2000	Kafo sing fre stirr thi/calf	\$1,226.86	\$1,226.86	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2010	Kafo sng solid stirrup w/o j	\$1,107.51	\$1,107.51	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2020	Kafo dbl solid stirrup band/	\$1,412.38	\$1,412.38	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2030	Kafo dbl solid stirrup w/o j	\$1,216.36	\$1,216.36	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2035	KAFO plastic pediatric size	\$170.41	\$170.41	0	0%	0%	0%	0	0	0	0	0	0		F	
L2036	Kafo plas doub free knee mol	\$2,171.34	\$2,171.34	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2037	Kafo plas sing free knee mol	\$1,791.33	\$1,791.33	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2038	Kafo w/o joint multi-axis an	\$1,509.02	\$1,509.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2039	KAFO,plstic,medlat rotat con	\$2,104.52	\$2,104.52	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2040	Hkafo torsion bil rot straps	\$207.28	\$207.28	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2050	Hkafo torsion cable hip pelv	\$438.28	\$438.28	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2060	Hkafo torsion ball bearing j	\$620.54	\$620.54	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2070	Hkafo torsion unilat rot str	\$122.00	\$122.00	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2080	Hkafo unilat torsion cable	\$376.15	\$376.15	0	0%	0%	0%	0	0	0	0	0	0		F	Y

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective July 1, 2004

HCPCS CPT ^(c)		DOLLAR VALUE			MODIFIERS											
CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L2090	Hkafo unilat torsion ball br	\$530.39	\$530.39	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2106	Afo tib fx cast plaster mold	\$635.78	\$635.78	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2108	Afo tib fx cast molded to pt	\$1,087.14	\$1,087.14	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2112	Afo tibial fracture soft	\$438.83	\$438.83	0	0%	0%	0%	0	0	0	0	0	0		F	
L2114	Afo tib fx semi-rigid	\$538.50	\$538.50	0	0%	0%	0%	0	0	0	0	0	0		F	
L2116	Afo tibial fracture rigid	\$645.83	\$645.83	0	0%	0%	0%	0	0	0	0	0	0		F	
L2126	Kafo fem fx cast thermoplas	\$1,086.32	\$1,086.32	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2128	Kafo fem fx cast molded to p	\$2,074.12	\$2,074.12	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2132	Kafo femoral fx cast soft	\$731.81	\$731.81	0	0%	0%	0%	0	0	0	0	0	0		F	
L2134	Kafo fem fx cast semi-rigid	\$917.55	\$917.55	0	0%	0%	0%	0	0	0	0	0	0		F	
L2136	Kafo femoral fx cast rigid	\$1,072.85	\$1,072.85	0	0%	0%	0%	0	0	0	0	0	0		F	
L2180	Plas shoe insert w ank joint	\$106.23	\$106.23	0	0%	0%	0%	0	0	0	0	0	0		F	
L2182	Drop lock knee	\$97.76	\$97.76	0	0%	0%	0%	0	0	0	0	0	0		F	
L2184	Limited motion knee joint	\$112.38	\$112.38	0	0%	0%	0%	0	0	0	0	0	0		F	
L2186	Adj motion knee jnt lerman t	\$157.25	\$157.25	0	0%	0%	0%	0	0	0	0	0	0		F	
L2188	Quadrilateral brim	\$294.40	\$294.40	0	0%	0%	0%	0	0	0	0	0	0		F	
L2190	Waist belt	\$79.23	\$79.23	0	0%	0%	0%	0	0	0	0	0	0		F	
L2192	Pelvic band & belt thigh fla	\$323.46	\$323.46	0	0%	0%	0%	0	0	0	0	0	0		F	
L2200	Limited ankle motion ea jnt	\$57.51	\$57.51	0	0%	0%	0%	0	0	0	0	0	0		F	
L2210	Dorsiflexion assist each joi	\$63.92	\$63.92	0	0%	0%	0%	0	0	0	0	0	0		F	
L2220	Dorsi & plantar flex ass/res	\$87.81	\$87.81	0	0%	0%	0%	0	0	0	0	0	0		F	
L2230	Split flat caliper stirr & p	\$85.46	\$85.46	0	0%	0%	0%	0	0	0	0	0	0		F	
L2240	Round caliper and plate atta	\$76.59	\$76.59	0	0%	0%	0%	0	0	0	0	0	0		F	
L2250	Foot plate molded stirrup at	\$429.81	\$429.81	0	0%	0%	0%	0	0	0	0	0	0		F	
L2260	Reinforced solid stirrup	\$181.86	\$181.86	0	0%	0%	0%	0	0	0	0	0	0		F	
L2265	Long tongue stirrup	\$106.84	\$106.84	0	0%	0%	0%	0	0	0	0	0	0		F	
L2270	Varus/valgus strap padded/li	\$64.96	\$64.96	0	0%	0%	0%	0	0	0	0	0	0		F	
L2275	Plastic mod low ext pad/line	\$141.88	\$141.88	0	0%	0%	0%	0	0	0	0	0	0		F	
L2280	Molded inner boot	\$411.41	\$411.41	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2300	Abduction bar jointed adjust	\$304.53	\$304.53	0	0%	0%	0%	0	0	0	0	0	0		F	
L2310	Abduction bar-straight	\$148.80	\$148.80	0	0%	0%	0%	0	0	0	0	0	0		F	
L2320	Non-molded lacer	\$238.44	\$238.44	0	0%	0%	0%	0	0	0	0	0	0		F	
L2330	Lacer molded to patient mode	\$421.42	\$421.42	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2335	Anterior swing band	\$225.63	\$225.63	0	0%	0%	0%	0	0	0	0	0	0		F	
L2340	Pre-tibial shell molded to p	\$500.68	\$500.68	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2350	Prosthetic type socket molde	\$911.96	\$911.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2360	Extended steel shank	\$62.58	\$62.58	0	0%	0%	0%	0	0	0	0	0	0		F	
L2370	Patten bottom	\$248.85	\$248.85	0	0%	0%	0%	0	0	0	0	0	0		F	

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	
L2375	Torsion ank & half solid sti	\$102.50	\$102.50	0	0%	0%	0%	0	0	0	0	0	0			F	
L2380	Torsion straight knee joint	\$113.71	\$113.71	0	0%	0%	0%	0	0	0	0	0	0			F	
L2385	Straight knee joint heavy du	\$121.52	\$121.52	0	0%	0%	0%	0	0	0	0	0	0			F	
L2390	Offset knee joint each	\$99.31	\$99.31	0	0%	0%	0%	0	0	0	0	0	0			F	
L2395	Offset knee joint heavy duty	\$141.94	\$141.94	0	0%	0%	0%	0	0	0	0	0	0			F	
L2397	Suspension sleeve lower ext	\$119.89	\$119.89	0	0%	0%	0%	0	0	0	0	0	0			F	
L2405	Knee joint drop lock ea jnt	\$82.55	\$82.55	0	0%	0%	0%	0	0	0	0	0	0			F	
L2415	Knee joint cam lock each joi	\$115.01	\$115.01	0	0%	0%	0%	0	0	0	0	0	0			F	
L2425	Knee disc/dial lock/adj flex	\$135.75	\$135.75	0	0%	0%	0%	0	0	0	0	0	0			F	
L2430	Knee jnt ratchet lock ea jnt	\$135.75	\$135.75	0	0%	0%	0%	0	0	0	0	0	0			F	
L2435	Knee joint polycentric joint	\$184.23	\$184.23	0	0%	0%	0%	0	0	0	0	0	0			F	
L2492	Knee lift loop drop lock rin	\$95.93	\$95.93	0	0%	0%	0%	0	0	0	0	0	0			F	
L2500	Thi/glut/ischia wgt bearing	\$307.28	\$307.28	0	0%	0%	0%	0	0	0	0	0	0			F	
L2510	Th/wght bear quad-lat brim m	\$749.59	\$749.59	0	0%	0%	0%	0	0	0	0	0	0			F	Y
L2520	Th/wght bear quad-lat brim c	\$441.61	\$441.61	0	0%	0%	0%	0	0	0	0	0	0			F	
L2525	Th/wght bear nar m-l brim mo	\$1,177.19	\$1,177.19	0	0%	0%	0%	0	0	0	0	0	0			F	Y
L2526	Th/wght bear nar m-l brim cu	\$828.50	\$828.50	0	0%	0%	0%	0	0	0	0	0	0			F	
L2530	Thigh/wght bear lacer non-mo	\$222.57	\$222.57	0	0%	0%	0%	0	0	0	0	0	0			F	
L2540	Thigh/wght bear lacer molded	\$483.79	\$483.79	0	0%	0%	0%	0	0	0	0	0	0			F	Y
L2550	Thigh/wght bear high roll cu	\$284.30	\$284.30	0	0%	0%	0%	0	0	0	0	0	0			F	
L2570	Hip clevis type 2 posit jnt	\$445.15	\$445.15	0	0%	0%	0%	0	0	0	0	0	0			F	
L2580	Pelvic control pelvic sling	\$497.60	\$497.60	0	0%	0%	0%	0	0	0	0	0	0			F	
L2600	Hip clevis/thrust bearing fr	\$215.81	\$215.81	0	0%	0%	0%	0	0	0	0	0	0			F	
L2610	Hip clevis/thrust bearing lo	\$260.09	\$260.09	0	0%	0%	0%	0	0	0	0	0	0			F	
L2620	Pelvic control hip heavy dut	\$285.32	\$285.32	0	0%	0%	0%	0	0	0	0	0	0			F	
L2622	Hip joint adjustable flexion	\$278.20	\$278.20	0	0%	0%	0%	0	0	0	0	0	0			F	
L2624	Hip adj flex ext abduct cont	\$300.41	\$300.41	0	0%	0%	0%	0	0	0	0	0	0			F	
L2627	Plastic mold recipro hip & c	\$1,555.19	\$1,555.19	0	0%	0%	0%	0	0	0	0	0	0			F	Y
L2628	Metal frame recipro hip & ca	\$2,026.52	\$2,026.52	0	0%	0%	0%	0	0	0	0	0	0			F	
L2630	Pelvic control band & belt u	\$237.30	\$237.30	0	0%	0%	0%	0	0	0	0	0	0			F	
L2640	Pelvic control band & belt b	\$369.83	\$369.83	0	0%	0%	0%	0	0	0	0	0	0			F	
L2650	Pelv & thor control gluteal	\$145.16	\$145.16	0	0%	0%	0%	0	0	0	0	0	0			F	
L2660	Thoracic control thoracic ba	\$169.08	\$169.08	0	0%	0%	0%	0	0	0	0	0	0			F	
L2670	Thorac cont paraspinal uprig	\$159.98	\$159.98	0	0%	0%	0%	0	0	0	0	0	0			F	
L2680	Thorac cont lat support upri	\$141.97	\$141.97	0	0%	0%	0%	0	0	0	0	0	0			F	
L2750	Plating chrome/nickel pr bar	\$89.09	\$89.09	0	0%	0%	0%	0	0	0	0	0	0			F	Y
L2755	Carbon graphite lamination	\$123.75	\$123.75	0	0%	0%	0%	0	0	0	0	0	0			F	Y
L2760	Extension per extension per	\$56.28	\$56.28	0	0%	0%	0%	0	0	0	0	0	0			F	

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L2768	Ortho sidebar disconnect	\$123.38	\$123.38	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2770	Low ext orthosis per bar/jnt	\$56.02	\$56.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2780	Non-corrosive finish	\$81.85	\$81.85	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2785	Drop lock retainer each	\$31.74	\$31.74	0	0%	0%	0%	0	0	0	0	0	0		F	
L2795	Knee control full kneecap	\$95.56	\$95.56	0	0%	0%	0%	0	0	0	0	0	0		F	
L2800	Knee cap medial or lateral p	\$110.92	\$110.92	0	0%	0%	0%	0	0	0	0	0	0		F	
L2810	Knee control condylar pad	\$70.85	\$70.85	0	0%	0%	0%	0	0	0	0	0	0		F	
L2820	Soft interface below knee se	\$78.78	\$78.78	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2830	Soft interface above knee se	\$85.23	\$85.23	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L2840	Tibial length sock fx or equ	\$39.64	\$39.64	0	0%	0%	0%	0	0	0	0	0	0		F	
L2850	Femoral lgth sock fx or equa	\$56.17	\$56.17	0	0%	0%	0%	0	0	0	0	0	0		F	
L2860	Torsion mechanism knee/ankle	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L2999	Lower extremity orthosis NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L3000	Ft insert ucb berkeley shell	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3001	Foot insert remov molded spe	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3002	Foot insert plastazote or eq	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3003	Foot insert silicone gel eac	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3010	Foot longitudinal arch suppo	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3020	Foot longitud/metatarsal sup	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3030	Foot arch support remov prem	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3031	Foot lamin/prepreg composite	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3040	Ft arch suprt premold longit	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3050	Foot arch supp premold metat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3060	Foot arch supp longitud/meta	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3070	Arch suprt att to sho longit	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3080	Arch supp att to shoe metata	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3090	Arch supp att to shoe long/m	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3100	Hallus-valgus nght dynamic s	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3140	Abduction rotation bar shoe	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3150	Abduct rotation bar w/o shoe	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3160	Shoe styled positioning dev	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3170	Foot plastic heel stabilizer	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3201	Oxford w supinat/pronat inf	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3202	Oxford w/ supinat/pronator c	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3203	Oxford w/ supinator/pronator	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3204	Hightop w/ supp/pronator inf	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3206	Hightop w/ supp/pronator chi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3207	Hightop w/ supp/pronator jun	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	

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L3208	Surgical boot each infant	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3209	Surgical boot each child	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3211	Surgical boot each junior	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3212	Benesch boot pair infant	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3213	Benesch boot pair child	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3214	Benesch boot pair junior	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3215	Orthopedic ftwear ladies oxf	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3216	Orthoped ladies shoes dpth i	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3217	Ladies shoes hightop depth i	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3219	Orthopedic mens shoes oxford	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3221	Orthopedic mens shoes dpth i	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3222	Mens shoes hightop depth inl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3224	Woman's shoe oxford brace	\$53.34	\$53.34	0	0%	0%	0%	0	0	0	0	0	0			F
L3225	Man's shoe oxford brace	\$61.37	\$61.37	0	0%	0%	0%	0	0	0	0	0	0			F
L3230	Custom shoes depth inlay	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3250	Custom mold shoe remov prost	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3251	Shoe molded to pt silicone s	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3252	Shoe molded plastazote cust	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3253	Shoe molded plastazote cust	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3254	Orth foot non-stdnd size/w	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3255	Orth foot non-standard size/	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3257	Orth foot add charge split s	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3260	Ambulatory surgical boot eac	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3265	Plastazote sandal each	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3300	Sho lift taper to metatarsal	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3310	Shoe lift elev heel/sole neo	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3320	Shoe lift elev heel/sole cor	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3330	Lifts elevation metal extens	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3332	Shoe lifts tapered to one-ha	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3334	Shoe lifts elevation heel /i	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3340	Shoe wedge sach	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3350	Shoe heel wedge	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3360	Shoe sole wedge outside sole	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3370	Shoe sole wedge between sole	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3380	Shoe clubfoot wedge	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3390	Shoe outflare wedge	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3400	Shoe metatarsal bar wedge ro	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L3410	Shoe metatarsal bar between	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI		
L3420	Full sole/heel wedge btween	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3430	Sho heel count plast reinfor	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3440	Heel leather reinforced	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3450	Shoe heel sach cushion type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3455	Shoe heel new leather standa	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3460	Shoe heel new rubber standar	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3465	Shoe heel thomas with wedge	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3470	Shoe heel thomas extend to b	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3480	Shoe heel pad & depress for	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3485	Shoe heel pad removable for	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3500	Ortho shoe add leather insol	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3510	Orthopedic shoe add rub insl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3520	O shoe add felt w leath insl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3530	Ortho shoe add half sole	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3540	Ortho shoe add full sole	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3550	O shoe add standard toe tap	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3560	O shoe add horseshoe toe tap	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3570	O shoe add instep extension	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3580	O shoe add instep velcro clo	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3590	O shoe convert to sof counte	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3595	Ortho shoe add march bar	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3600	Trans shoe calip plate exist	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3610	Trans shoe caliper plate new	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3620	Trans shoe solid stirrup exi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3630	Trans shoe solid stirrup new	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3640	Shoe dennis browne splint bo	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3649	Orthopedic shoe modifica NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
L3650	Shlder fig 8 abduct restrain	\$56.11	\$56.11	0	0%	0%	0%	0	0	0	0	0	0		F		
L3651	Prefab shoulder orthosis	\$56.75	\$56.75	0	0%	0%	0%	0	0	0	0	0	0		F		
L3652	Prefab dbl shoulder orthosis	\$171.01	\$171.01	0	0%	0%	0%	0	0	0	0	0	0		F		
L3660	Abduct restrainer canvas&web	\$91.24	\$91.24	0	0%	0%	0%	0	0	0	0	0	0		F		
L3670	Acromio/clavicular canvas&we	\$104.34	\$104.34	0	0%	0%	0%	0	0	0	0	0	0		F		
L3675	Canvas vest SO	\$151.24	\$151.24	0	0%	0%	0%	0	0	0	0	0	0		F		
L3677	SO hard plastic stabilizer	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y	
L3700	Elbow orthoses elas w stays	\$69.97	\$69.97	0	0%	0%	0%	0	0	0	0	0	0		F		
L3701	Prefab elbow orthosis	\$17.55	\$17.55	0	0%	0%	0%	0	0	0	0	0	0		F		
L3710	Elbow elastic with metal joi	\$109.74	\$109.74	0	0%	0%	0%	0	0	0	0	0	0		F		
L3720	Forearm/arm cuffs free motio	\$693.55	\$693.55	0	0%	0%	0%	0	0	0	0	0	0		F		

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L3730	Forearm/arm cuffs ext/flex a	\$933.08	\$933.08	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3740	Cuffs adj lock w/ active con	\$952.51	\$952.51	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3760	EO withjoint, Prefabricated	\$430.99	\$430.99	0	0%	0%	0%	0	0	0	0	0	0		F	
L3762	Rigid EO wo joints	\$92.66	\$92.66	0	0%	0%	0%	0	0	0	0	0	0		F	
L3800	Whfo short opponen no attach	\$236.01	\$236.01	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3805	Whfo long opponens no attach	\$291.08	\$291.08	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3807	WHFO,no joint, prefabricated	\$215.49	\$215.49	0	0%	0%	0%	0	0	0	0	0	0		F	
L3810	Whfo thumb abduction bar	\$57.53	\$57.53	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3815	Whfo second m.p. abduction a	\$53.41	\$53.41	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3820	Whfo ip ext asst w/ mp ext s	\$91.74	\$91.74	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3825	Whfo m.p. extension stop	\$59.56	\$59.56	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3830	Whfo m.p. extension assist	\$76.88	\$76.88	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3835	Whfo m.p. spring extension a	\$108.63	\$108.63	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3840	Whfo spring swivel thumb	\$55.80	\$55.80	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3845	Whfo thumb ip ext ass w/ mp	\$81.94	\$81.94	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3850	Action wrist w/ dorsiflex as	\$102.93	\$102.93	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3855	Whfo adj m.p. flexion contro	\$103.76	\$103.76	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3860	Whfo adj m.p. flex ctrl & i.	\$142.04	\$142.04	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3890	Torsion mechanism wrist/elbo	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3900	Hinge extension/flex wrist/f	\$1,292.82	\$1,292.82	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3901	Hinge ext/flex wrist finger	\$1,598.32	\$1,598.32	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3902	Whfo ext power compress gas	\$2,231.22	\$2,231.22	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3904	Whfo electric custom fitted	\$2,599.67	\$2,599.67	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3906	Wrist gauntlet molded to pt	\$367.89	\$367.89	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3907	Whfo wrst gauntlt thmb spica	\$450.95	\$450.95	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3908	Wrist cock-up non-molded	\$70.92	\$70.92	0	0%	0%	0%	0	0	0	0	0	0		F	
L3909	Prefab wrist orthosis	\$12.16	\$12.16	0	0%	0%	0%	0	0	0	0	0	0		F	
L3910	Whfo swanson design	\$332.99	\$332.99	0	0%	0%	0%	0	0	0	0	0	0		F	
L3911	Prefab hand finger orthosis	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L3912	Flex glove w/elastic finger	\$112.25	\$112.25	0	0%	0%	0%	0	0	0	0	0	0		F	
L3914	WHO wrist extension cock-up	\$88.24	\$88.24	0	0%	0%	0%	0	0	0	0	0	0		F	
L3916	Whfo wrist extens w/ outrigg	\$119.55	\$119.55	0	0%	0%	0%	0	0	0	0	0	0		F	
L3917	Hand orthosis, metacarpal fracture	\$91.04	\$91.04	0	0%	0%	0%	0	0	0	0	0	0		F	
L3918	HFO knuckle bender	\$75.61	\$75.61	0	0%	0%	0%	0	0	0	0	0	0		F	
L3920	Knuckle bender with outrigge	\$99.28	\$99.28	0	0%	0%	0%	0	0	0	0	0	0		F	
L3922	Knuckle bend 2 seg to flex j	\$115.74	\$115.74	0	0%	0%	0%	0	0	0	0	0	0		F	
L3923	HFO, no joint, prefabricated	\$33.53	\$33.53	0	0%	0%	0%	0	0	0	0	0	0		F	
L3924	Oppenheimer	\$126.22	\$126.22	0	0%	0%	0%	0	0	0	0	0	0		F	

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L3926	Thomas suspension	\$87.59	\$87.59	0	0%	0%	0%	0	0	0	0	0	0		F	
L3928	Finger extension w/ clock sp	\$56.34	\$56.34	0	0%	0%	0%	0	0	0	0	0	0		F	
L3930	Finger extension with wrist	\$54.62	\$54.62	0	0%	0%	0%	0	0	0	0	0	0		F	
L3932	Safety pin spring wire	\$48.28	\$48.28	0	0%	0%	0%	0	0	0	0	0	0		F	
L3934	Safety pin modified	\$57.03	\$57.03	0	0%	0%	0%	0	0	0	0	0	0		F	
L3936	Palmer	\$105.44	\$105.44	0	0%	0%	0%	0	0	0	0	0	0		F	
L3938	Dorsal wrist	\$108.51	\$108.51	0	0%	0%	0%	0	0	0	0	0	0		F	
L3940	Dorsal wrist w/ outrigger at	\$127.24	\$127.24	0	0%	0%	0%	0	0	0	0	0	0		F	
L3942	Reverse knuckle bender	\$68.98	\$68.98	0	0%	0%	0%	0	0	0	0	0	0		F	
L3944	Reverse knuckle bend w/ outr	\$93.34	\$93.34	0	0%	0%	0%	0	0	0	0	0	0		F	
L3946	HFO composite elastic	\$104.90	\$104.90	0	0%	0%	0%	0	0	0	0	0	0		F	
L3948	Finger knuckle bender	\$49.35	\$49.35	0	0%	0%	0%	0	0	0	0	0	0		F	
L3950	Oppenheimer w/ knuckle bend	\$156.24	\$156.24	0	0%	0%	0%	0	0	0	0	0	0		F	
L3952	Oppenheimer w/ rev knuckle 2	\$197.00	\$197.00	0	0%	0%	0%	0	0	0	0	0	0		F	
L3954	Spreading hand	\$107.81	\$107.81	0	0%	0%	0%	0	0	0	0	0	0		F	
L3956	Add joint upper ext orthosis	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L3960	Sewho airplan desig abdu pos	\$733.60	\$733.60	0	0%	0%	0%	0	0	0	0	0	0		F	
L3962	Sewho erbs palsey design abd	\$792.77	\$792.77	0	0%	0%	0%	0	0	0	0	0	0		F	
L3963	Molded w/ articulating elbow	\$1,481.02	\$1,481.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3964	Seo mobile arm sup att to wc	\$748.54	\$748.54	0	0%	0%	0%	0	0	0	0	0	0		F	
L3965	Arm supp att to wc rancho ty	\$1,194.45	\$1,194.45	0	0%	0%	0%	0	0	0	0	0	0		F	
L3966	Mobile arm supports reclinin	\$867.98	\$867.98	0	0%	0%	0%	0	0	0	0	0	0		F	
L3968	Friction dampening arm supp	\$1,138.71	\$1,138.71	0	0%	0%	0%	0	0	0	0	0	0		F	
L3969	Monosuspension arm/hand supp	\$796.30	\$796.30	0	0%	0%	0%	0	0	0	0	0	0		F	
L3970	Elevat proximal arm support	\$292.24	\$292.24	0	0%	0%	0%	0	0	0	0	0	0		F	
L3972	Offset/lat rocker arm w/ ela	\$172.17	\$172.17	0	0%	0%	0%	0	0	0	0	0	0		F	
L3974	Mobile arm support supinator	\$171.80	\$171.80	0	0%	0%	0%	0	0	0	0	0	0		F	
L3980	Upp ext fx orthosis humeral	\$274.44	\$274.44	0	0%	0%	0%	0	0	0	0	0	0		F	
L3982	Upper ext fx orthosis rad/ul	\$331.41	\$331.41	0	0%	0%	0%	0	0	0	0	0	0		F	
L3984	Upper ext fx orthosis wrist	\$318.91	\$318.91	0	0%	0%	0%	0	0	0	0	0	0		F	
L3985	Forearm hand fx orth w/ wr h	\$565.33	\$565.33	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3986	Humeral rad/ulna wrist fx or	\$546.85	\$546.85	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L3995	Sock fracture or equal each	\$32.23	\$32.23	0	0%	0%	0%	0	0	0	0	0	0		F	
L3999	Upper limb orthosis NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L4000	Repl girdle milwaukee orth	\$1,314.09	\$1,314.09	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L4010	Replace trilateral socket br	\$726.07	\$726.07	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L4020	Replace quadlat socket brim	\$869.31	\$869.31	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L4030	Replace socket brim cust fit	\$599.42	\$599.42	0	0%	0%	0%	0	0	0	0	0	0		F	Y

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	
L4040	Replace molded thigh lacer	\$493.75	\$493.75	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4045	Replace non-molded thigh lac	\$300.19	\$300.19	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4050	Replace molded calf lacer	\$451.25	\$451.25	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4055	Replace non-molded calf lace	\$246.02	\$246.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4060	Replace high roll cuff	\$366.56	\$366.56	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4070	Replace prox & dist upright	\$302.19	\$302.19	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4080	Repl met band kafo-afo prox	\$108.67	\$108.67	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4090	Repl met band kafo-afo calf/	\$109.14	\$109.14	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4100	Repl leath cuff kafo prox th	\$126.17	\$126.17	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4110	Repl leath cuff kafo-afo cal	\$102.57	\$102.57	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4130	Replace pretibial shell	\$600.12	\$600.12	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L4205	Ortho dvc repair per 15 min	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y	
L4210	Orth dev repair/repl minor p	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y	
L4350	Pneumatic ankle cntrl splint	\$89.30	\$89.30	0	0%	0%	0%	0	0	0	0	0	0		F		
L4360	Pneumatic walking splint	\$334.91	\$334.91	0	0%	0%	0%	0	0	0	0	0	0		F		
L4370	Pneumatic full leg splint	\$228.35	\$228.35	0	0%	0%	0%	0	0	0	0	0	0		F		
L4380	Pneumatic knee splint	\$124.98	\$124.98	0	0%	0%	0%	0	0	0	0	0	0		F		
L4386	Non-pneumatic walking splint	\$150.14	\$150.14	0	0%	0%	0%	0	0	0	0	0	0		F		
L4392	Replace AFO soft interface	\$21.92	\$21.92	0	0%	0%	0%	0	0	0	0	0	0		F		
L4394	Replace foot drop spint	\$15.97	\$15.97	0	0%	0%	0%	0	0	0	0	0	0		F		
L4396	Static AFO	\$156.26	\$156.26	0	0%	0%	0%	0	0	0	0	0	0		F		
L4398	Foot drop splint recumbent	\$71.94	\$71.94	0	0%	0%	0%	0	0	0	0	0	0		F		
L5000	Sho insert w arch toe filler	\$508.68	\$508.68	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5010	Mold socket ank hgt w/ toe f	\$1,225.69	\$1,225.69	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5020	Tibial tubercle hgt w/ toe f	\$2,273.04	\$2,273.04	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5050	Ank symes mold sckt sach ft	\$2,713.87	\$2,713.87	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5060	Symes met fr leath socket ar	\$3,601.24	\$3,601.24	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5100	Molded socket shin sach foot	\$2,812.96	\$2,812.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5105	Plast socket jts/thgh lacer	\$3,970.02	\$3,970.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5150	Mold sckt ext knee shin sach	\$4,104.96	\$4,104.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5160	Mold socket bent knee shin s	\$5,008.18	\$5,008.18	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5200	Kne sing axis fric shin sach	\$4,101.03	\$4,101.03	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5210	No knee/ankle joints w/ ft b	\$3,257.35	\$3,257.35	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5220	No knee joint with artic ali	\$3,702.57	\$3,702.57	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5230	Fem focal defic constant fri	\$4,951.95	\$4,951.95	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5250	Hip canad sing axi cons fric	\$6,443.98	\$6,443.98	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5270	Tilt table locking hip sing	\$6,903.90	\$6,903.90	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5280	Hemipelvect canad sing axis	\$6,834.85	\$6,834.85	0	0%	0%	0%	0	0	0	0	0	0		F	Y	

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L5301	BK mold socket SACH ft endo	\$2,820.55	\$2,820.55	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5311	Knee disart, SACH ft, endo	\$4,427.77	\$4,427.77	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5321	AK open end SACH	\$4,357.27	\$4,357.27	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5331	Hip disart canadian SACH ft	\$6,182.45	\$6,182.45	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5341	Hemipelvectomy canadian SACH	\$6,452.79	\$6,452.79	0	0%	0%	0%	0	0	0	0	0	0		F	
L5400	Postop dress & 1 cast chg bk	\$1,346.35	\$1,346.35	0	0%	0%	0%	0	0	0	0	0	0		F	
L5410	Postop dsg bk ea add cast ch	\$517.53	\$517.53	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5420	Postop dsg & 1 cast chg ak/d	\$1,626.20	\$1,626.20	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5430	Postop dsg ak ea add cast ch	\$507.59	\$507.59	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5450	Postop app non-wgt bear dsg	\$444.20	\$444.20	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5460	Postop app non-wgt bear dsg	\$588.16	\$588.16	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5500	Init bk ptb plaster direct	\$1,293.02	\$1,293.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5505	Init ak ischal plstr direct	\$1,751.10	\$1,751.10	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5510	Prep BK ptb plaster molded	\$1,588.23	\$1,588.23	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5520	Perp BK ptb thermopls direct	\$1,447.79	\$1,447.79	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5530	Prep BK ptb thermopls molded	\$2,020.41	\$2,020.41	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5535	Prep BK ptb open end socket	\$2,086.94	\$2,086.94	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5540	Prep BK ptb laminated socket	\$2,227.52	\$2,227.52	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5560	Prep AK ischial plast molded	\$2,176.18	\$2,176.18	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5570	Prep AK ischial direct form	\$2,288.91	\$2,288.91	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5580	Prep AK ischial thermo mold	\$2,622.11	\$2,622.11	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5585	Prep AK ischial open end	\$2,906.18	\$2,906.18	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5590	Prep AK ischial laminated	\$2,544.24	\$2,544.24	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5595	Hip disartic sach thermopls	\$4,544.78	\$4,544.78	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5600	Hip disart sach laminat mold	\$5,728.38	\$5,728.38	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5610	Above knee hydracadence	\$2,674.14	\$2,674.14	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5611	Ak 4 bar link w/fric swing	\$1,776.23	\$1,776.23	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5613	Ak 4 bar ling w/hydraul swig	\$2,467.29	\$2,467.29	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5614	4-bar link above knee w/swng	\$1,667.78	\$1,667.78	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5616	Ak univ multiplex sys frict	\$1,367.35	\$1,367.35	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5617	AK/BK self-aligning unit ea	\$552.99	\$552.99	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5618	Test socket symes	\$314.50	\$314.50	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5620	Test socket below knee	\$298.64	\$298.64	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5622	Test socket knee disarticula	\$421.18	\$421.18	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5624	Test socket above knee	\$379.19	\$379.19	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5626	Test socket hip disarticulat	\$550.51	\$550.51	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5628	Test socket hemipelvectomy	\$608.71	\$608.71	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5629	Below knee acrylic socket	\$319.96	\$319.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)							
L5630	Syme typ expandabl wall sckt	\$509.88	\$509.88	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5631	Ak/knee disartic acrylic soc	\$442.36	\$442.36	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5632	Symes type ptb brim design s	\$298.06	\$298.06	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5634	Symes type poster opening so	\$355.08	\$355.08	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5636	Symes type medial opening so	\$316.47	\$316.47	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5637	Below knee total contact	\$299.73	\$299.73	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5638	Below knee leather socket	\$555.42	\$555.42	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5639	Below knee wood socket	\$1,272.21	\$1,272.21	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5640	Knee disarticulat leather so	\$842.58	\$842.58	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5642	Above knee leather socket	\$831.69	\$831.69	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5643	Hip flex inner socket ext fr	\$1,798.85	\$1,798.85	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5644	Above knee wood socket	\$663.93	\$663.93	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5645	Bk flex inner socket ext fra	\$803.29	\$803.29	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5646	Below knee air cushion socke	\$590.49	\$590.49	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5647	Below knee suction socket	\$800.84	\$800.84	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5648	Above knee air cushion socke	\$662.84	\$662.84	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5649	Isch containmt/narrow m-l so	\$2,026.19	\$2,026.19	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5650	Tot contact ak/knee disart s	\$577.77	\$577.77	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5651	Ak flex inner socket ext fra	\$1,209.05	\$1,209.05	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5652	Suction susp ak/knee disart	\$438.93	\$438.93	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5653	Knee disart expand wall sock	\$720.15	\$720.15	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5654	Socket insert symes	\$390.05	\$390.05	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5655	Socket insert below knee	\$349.50	\$349.50	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5656	Socket insert knee articulat	\$497.96	\$497.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5658	Socket insert above knee	\$488.08	\$488.08	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5661	Multi-durometer symes	\$612.66	\$612.66	0	0%	0%	0%	0	0	0	0	0	0		F					
L5665	Multi-durometer below knee	\$515.49	\$515.49	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5666	Below knee cuff suspension	\$71.52	\$71.52	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5668	Socket insert w/o lock lower	\$112.96	\$112.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5670	Bk molded supracondylar susp	\$298.19	\$298.19	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5671	BK/AK locking mechanism	\$667.70	\$667.70	0	0%	0%	0%	0	0	0	0	0	0		F					
L5672	Bk removable medial brim sus	\$324.87	\$324.87	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5673	Socket insert w lock mech	\$737.32	\$737.32	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5674	Bk suspension sleeve	\$64.35	\$64.35	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5675	Bk heavy duty susp sleeve	\$87.22	\$87.22	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5676	Bk knee joints single axis p	\$424.99	\$424.99	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5677	Bk knee joints polycentric p	\$541.02	\$541.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y				
L5678	Bk joint covers pair	\$47.64	\$47.64	0	0%	0%	0%	0	0	0	0	0	0		F	Y				

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L5679	Socket insert w/o lock mech	\$614.44	\$614.44	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5680	Bk thigh lacer non-molded	\$356.94	\$356.94	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5681	Intl custm cong/latyp insert	\$1,329.20	\$1,329.20	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5682	Bk thigh lacer glut/ischia m	\$636.55	\$636.55	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5683	Initial custom socket insert	\$1,329.20	\$1,329.20	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5684	Bk fork strap	\$64.60	\$64.60	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5686	Bk back check	\$64.17	\$64.17	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5688	Bk waist belt webbing	\$70.25	\$70.25	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5690	Bk waist belt padded and lin	\$106.84	\$106.84	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5692	Ak pelvic control belt light	\$157.00	\$157.00	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5694	Ak pelvic control belt pad/l	\$242.58	\$242.58	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5695	Ak sleeve susp neoprene/equa	\$164.19	\$164.19	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5696	Ak/knee disartic pelvic join	\$248.36	\$248.36	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5697	Ak/knee disartic pelvic band	\$107.76	\$107.76	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5698	Ak/knee disartic silesian ba	\$125.90	\$125.90	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5699	Shoulder harness	\$247.47	\$247.47	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5700	Replace socket below knee	\$3,676.11	\$3,676.11	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5701	Replace socket above knee	\$4,467.25	\$4,467.25	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5702	Replace socket hip	\$5,349.15	\$5,349.15	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5704	Custom shape cover BK	\$613.94	\$613.94	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5705	Custom shape cover AK	\$1,007.89	\$1,007.89	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5706	Custom shape cvr knee disart	\$998.94	\$998.94	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5707	Custom shape cvr hip disart	\$1,420.06	\$1,420.06	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5710	Kne-shin exo sng axi mnl loc	\$458.09	\$458.09	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5711	Knee-shin exo mnl lock ultra	\$620.14	\$620.14	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5712	Knee-shin exo frict swg & st	\$556.72	\$556.72	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5714	Knee-shin exo variable frict	\$421.10	\$421.10	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5716	Knee-shin exo mech stance ph	\$733.78	\$733.78	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5718	Knee-shin exo frct swg & sta	\$917.14	\$917.14	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5722	Knee-shin pneum swg frct exo	\$1,067.87	\$1,067.87	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5724	Knee-shin exo fluid swing ph	\$1,616.99	\$1,616.99	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5726	Knee-shin ext jnts fld swg e	\$1,956.92	\$1,956.92	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5728	Knee-shin fluid swg & stance	\$2,604.40	\$2,604.40	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5780	Knee-shin pneum/hydra pneum	\$1,152.66	\$1,152.66	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5781	Lower limb pros vacuum pump	\$3,954.53	\$3,954.53	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5782	HD low limb pros vacuum pump	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L5785	Exoskeletal bk ultralt mater	\$624.86	\$624.86	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5790	Exoskeletal ak ultra-light m	\$752.36	\$752.36	0	0%	0%	0%	0	0	0	0	0	0		F	Y

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	
L5795	Exoskel hip ultra-light mate	\$1,080.97	\$1,080.97	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5810	Endoskel knee-shin mnl lock	\$559.75	\$559.75	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5811	Endo knee-shin mnl lck ultra	\$734.26	\$734.26	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5812	Endo knee-shin frct swg & st	\$635.46	\$635.46	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5814	Endo knee-shin hydal swg ph	\$3,670.60	\$3,670.60	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5816	Endo knee-shin polyc mch sta	\$856.20	\$856.20	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5818	Endo knee-shin frct swg & st	\$966.83	\$966.83	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5822	Endo knee-shin pneum swg frc	\$1,714.43	\$1,714.43	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5824	Endo knee-shin fluid swing p	\$1,543.95	\$1,543.95	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5826	Miniature knee joint	\$3,206.28	\$3,206.28	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5828	Endo knee-shin fluid swg/sta	\$2,843.05	\$2,843.05	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5830	Endo knee-shin pneum/swg pha	\$2,478.91	\$2,478.91	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5840	Multi-axial knee/shin system	\$4,063.51	\$4,063.51	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5845	Knee-shin sys stance flexion	\$1,771.47	\$1,771.47	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5846	Knee-shin sys microprocessor	\$5,357.46	\$5,357.46	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5847	Microprocessor cntrl feature	\$15,307.18	\$15,307.18	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5848	Knee-shin sys hydraul stance	\$1,062.80	\$1,062.80	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5850	Endo ak/hip knee extens assi	\$128.79	\$128.79	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5855	Mech hip extension assist	\$414.56	\$414.56	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5910	Endo below knee alignable sy	\$364.62	\$364.62	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5920	Endo ak/hip alignable system	\$534.17	\$534.17	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5925	Above knee manual lock	\$439.08	\$439.08	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5930	High activity knee frame	\$3,326.68	\$3,326.68	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5940	Endo bk ultra-light material	\$627.88	\$627.88	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5950	Endo ak ultra-light material	\$902.50	\$902.50	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5960	Endo hip ultra-light materia	\$1,031.52	\$1,031.52	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5962	Below knee flex cover system	\$789.03	\$789.03	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5964	Above knee flex cover system	\$1,135.86	\$1,135.86	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5966	Hip flexible cover system	\$1,472.61	\$1,472.61	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5968	Multiaxial ankle w dorsiflex	\$3,591.58	\$3,591.58	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5970	Foot external keel sach foot	\$246.96	\$246.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5972	Flexible keel foot	\$394.68	\$394.68	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5974	Foot single axis ankle/foot	\$312.80	\$312.80	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5975	Combo ankle/foot prosthesis	\$458.19	\$458.19	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5976	Energy storing foot	\$630.27	\$630.27	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5978	Ft prosth multiaxial anl/ft	\$356.21	\$356.21	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5979	Multi-axial ankle/ft prosth	\$3,034.66	\$3,034.66	0	0%	0%	0%	0	0	0	0	0	0		F	Y	
L5980	Flex foot system	\$4,081.45	\$4,081.45	0	0%	0%	0%	0	0	0	0	0	0		F	Y	

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L5981	Flex-walk sys low ext prosth	\$3,297.79	\$3,297.79	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5982	Exoskeletal axial rotation u	\$769.33	\$769.33	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5984	Endoskeletal axial rotation	\$727.31	\$727.31	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5985	Lwr ext dynamic prosth pylon	\$279.09	\$279.09	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5986	Multi-axial rotation unit	\$769.80	\$769.80	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5987	Shank ft w vert load pylon	\$7,109.90	\$7,109.90	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5988	Vertical shock reducing pylo	\$1,974.43	\$1,974.43	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5989	Pylon w elctrnc force sensor	\$3,061.42	\$3,061.42	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5990	User adjustable heel height	\$1,793.06	\$1,793.06	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L5995	Lower ext pros heavyduty fea	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L5999	Lowr extremity prosthes NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L6000	Par hand robin-aids thum rem	\$1,783.59	\$1,783.59	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6010	Hand robin-aids little/ring	\$1,984.84	\$1,984.84	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6020	Part hand robin-aids no fing	\$1,850.55	\$1,850.55	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6025	Part hand disart myoelectric	\$7,909.13	\$7,909.13	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6050	Wrst MLd sck flx hng tri pad	\$2,185.80	\$2,185.80	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6055	Wrst mold sock w/exp interfa	\$3,263.72	\$3,263.72	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6100	Elb mold sock flex hinge pad	\$2,354.39	\$2,354.39	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6110	Elbow mold sock suspension t	\$2,401.31	\$2,401.31	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6120	Elbow mold doub splt soc ste	\$3,019.58	\$3,019.58	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6130	Elbow stump activated lock h	\$3,474.99	\$3,474.99	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6200	Elbow mold outsid lock hinge	\$3,566.28	\$3,566.28	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6205	Elbow molded w/ expand inter	\$4,468.02	\$4,468.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6250	Elbow inter loc elbow forarm	\$3,325.79	\$3,325.79	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6300	Shlder disart int lock elbow	\$4,678.17	\$4,678.17	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6310	Shoulder passive restor comp	\$3,883.26	\$3,883.26	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6320	Shoulder passive restor cap	\$1,720.50	\$1,720.50	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6350	Thoracic intern lock elbow	\$5,257.92	\$5,257.92	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6360	Thoracic passive restor comp	\$4,275.66	\$4,275.66	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6370	Thoracic passive restor cap	\$2,044.83	\$2,044.83	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6380	Postop dsg cast chg wrst/elb	\$1,376.72	\$1,376.72	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6382	Postop dsg cast chg elb dis/	\$1,620.73	\$1,620.73	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6384	Postop dsg cast chg shlder/t	\$2,051.84	\$2,051.84	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6386	Postop ea cast chg & realign	\$464.74	\$464.74	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6388	Postop applicat rigid dsg on	\$510.80	\$510.80	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6400	Below elbow prosth tiss shap	\$2,606.51	\$2,606.51	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6450	Elb disart prosth tiss shap	\$3,538.30	\$3,538.30	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6500	Above elbow prosth tiss shap	\$3,578.74	\$3,578.74	0	0%	0%	0%	0	0	0	0	0	0		F	Y

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE		
L6550	Shldr disar prosth tiss shap	\$4,787.33	\$4,787.33	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6570	Scap thorac prosth tiss shap	\$5,336.49	\$5,336.49	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6580	Wrist/elbow bowden cable mol	\$1,813.54	\$1,813.54	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6582	Wrist/elbow bowden cbl dir f	\$1,441.17	\$1,441.17	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6584	Elbow fair lead cable molded	\$2,448.63	\$2,448.63	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6586	Elbow fair lead cable dir fo	\$2,092.74	\$2,092.74	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6588	Shdr fair lead cable molded	\$3,543.41	\$3,543.41	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6590	Shdr fair lead cable direct	\$3,264.98	\$3,264.98	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6600	Polycentric hinge pair	\$204.61	\$204.61	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6605	Single pivot hinge pair	\$193.04	\$193.04	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6610	Flexible metal hinge pair	\$176.07	\$176.07	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6615	Disconnect locking wrist uni	\$215.16	\$215.16	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6616	Disconnect insert locking wr	\$78.41	\$78.41	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6620	Flexion-friction wrist unit	\$337.01	\$337.01	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6623	Spring-ass rot wrst w/ latch	\$724.98	\$724.98	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6625	Rotation wrst w/ cable lock	\$620.02	\$620.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6628	Quick disconn hook adapter o	\$582.27	\$582.27	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6629	Lamination collar w/ couplin	\$147.57	\$147.57	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6630	Stainless steel any wrist	\$216.98	\$216.98	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6632	Latex suspension sleeve each	\$65.41	\$65.41	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6635	Lift assist for elbow	\$190.21	\$190.21	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6637	Nudge control elbow lock	\$437.45	\$437.45	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6638	Elec lock on manual pw elbow	\$2,471.59	\$2,471.59	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6640	Shoulder abduction joint pai	\$346.85	\$346.85	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6641	Excursion amplifier pulley t	\$172.88	\$172.88	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6642	Excursion amplifier lever ty	\$233.83	\$233.83	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6645	Shoulder flexion-abduction j	\$399.12	\$399.12	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6646	Multipo locking shoulder jnt	\$3,117.23	\$3,117.23	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6647	Shoulder lock actuator	\$513.18	\$513.18	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6648	Ext pwrld shlder lock/unlock	\$3,214.99	\$3,214.99	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6650	Shoulder universal joint	\$344.22	\$344.22	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6655	Standard control cable extra	\$100.83	\$100.83	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6660	Heavy duty control cable	\$106.76	\$106.76	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6665	Teflon or equal cable lining	\$49.64	\$49.64	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6670	Hook to hand cable adapter	\$51.33	\$51.33	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6672	Harness chest/shlder saddle	\$194.88	\$194.88	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6675	Harness figure of 8 sing con	\$120.91	\$120.91	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6676	Harness figure of 8 dual con	\$148.65	\$148.65	0	0%	0%	0%	0	0	0	0	0	0		F	Y

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L6680	Test sock wrist disart/bel e	\$239.51	\$239.51	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6682	Test sock elbw disart/above	\$304.70	\$304.70	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6684	Test socket shldr disart/tho	\$466.91	\$466.91	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6686	Suction socket	\$669.35	\$669.35	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6687	Frame typ socket bel elbow/w	\$580.71	\$580.71	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6688	Frame typ sock above elb/dis	\$711.11	\$711.11	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6689	Frame typ socket shoulder di	\$870.35	\$870.35	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6690	Frame typ sock interscap-tho	\$923.03	\$923.03	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6691	Removable insert each	\$399.31	\$399.31	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6692	Silicone gel insert or equal	\$563.02	\$563.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6693	Lockingelbow forearm cntrbal	\$2,805.93	\$2,805.93	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6700	Terminal device model #3	\$594.81	\$594.81	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6705	Terminal device model #5	\$333.38	\$333.38	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6710	Terminal device model #5x	\$399.95	\$399.95	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6715	Terminal device model #5xa	\$395.64	\$395.64	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6720	Terminal device model #6	\$858.89	\$858.89	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6725	Terminal device model #7	\$440.70	\$440.70	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6730	Terminal device model #7lo	\$707.55	\$707.55	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6735	Terminal device model #8	\$374.80	\$374.80	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6740	Terminal device model #8x	\$444.11	\$444.11	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6745	Terminal device model #88x	\$406.73	\$406.73	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6750	Terminal device model #10p	\$422.20	\$422.20	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6755	Terminal device model #10x	\$422.11	\$422.11	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6765	Terminal device model #12p	\$432.36	\$432.36	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6770	Terminal device model #99x	\$422.66	\$422.66	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6775	Terminal device model#555	\$459.20	\$459.20	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6780	Terminal device model #ss555	\$510.03	\$510.03	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6790	Hooks-accu hook or equal	\$454.92	\$454.92	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6795	Hooks-2 load or equal	\$1,433.17	\$1,433.17	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6800	Hooks-aprl vc or equal	\$1,132.27	\$1,132.27	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6805	Modifier wrist flexion unit	\$425.81	\$425.81	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6806	Trs grip vc or equal	\$1,598.47	\$1,598.47	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6807	Term device grip1/2 or equal	\$1,430.41	\$1,430.41	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6808	Term device infant or child	\$1,232.04	\$1,232.04	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6809	Trs super sport passive	\$373.56	\$373.56	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6810	Pincher tool otto bock or eq	\$201.49	\$201.49	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6825	Hands dorrance vo	\$1,227.67	\$1,227.67	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6830	Hand aprl vc	\$1,572.13	\$1,572.13	0	0%	0%	0%	0	0	0	0	0	0		F	Y

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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
L6835	Hand sierra vo	\$1,426.14	\$1,426.14	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6840	Hand becker imperial	\$941.02	\$941.02	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6845	Hand becker lock grip	\$890.98	\$890.98	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6850	Term dvc-hand becker plylite	\$786.04	\$786.04	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6855	Hand robin-aids vo	\$914.13	\$914.13	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6860	Hand robin-aids vo soft	\$747.69	\$747.69	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6865	Hand passive hand	\$332.75	\$332.75	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6867	Hand detroit infant hand	\$1,236.88	\$1,236.88	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6868	Passive inf hand steeper/hos	\$278.82	\$278.82	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6870	Hand child mitt	\$270.37	\$270.37	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6872	Hand nyu child hand	\$1,028.47	\$1,028.47	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6873	Hand mech inf steeper or equ	\$470.97	\$470.97	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6875	Hand bock vc	\$943.78	\$943.78	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6880	Hand bock vo	\$596.83	\$596.83	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6881	Autograsp feature ul term dv	\$4,040.61	\$4,040.61	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6882	Microprocessor control uplmb	\$3,064.99	\$3,064.99	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6890	Production glove	\$186.95	\$186.95	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6895	Custom glove	\$624.15	\$624.15	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6900	Hand restorat thumb/1 finger	\$1,954.88	\$1,954.88	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6905	Hand restoration multiple fi	\$1,970.86	\$1,970.86	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6910	Hand restoration no fingers	\$1,617.56	\$1,617.56	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6915	Hand restoration replacmnt g	\$731.03	\$731.03	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6920	Wrist disarticul switch ctrl	\$7,834.03	\$7,834.03	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6925	Wrist disart myoelectronic c	\$8,567.65	\$8,567.65	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6930	Below elbow switch control	\$8,499.84	\$8,499.84	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6935	Below elbow myoelectronic ct	\$8,983.12	\$8,983.12	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6940	Elbow disarticulation switch	\$10,176.71	\$10,176.71	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6945	Elbow disart myoelectronic c	\$11,275.74	\$11,275.74	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6950	Above elbow switch control	\$10,629.26	\$10,629.26	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6955	Above elbow myoelectronic ct	\$12,024.40	\$12,024.40	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6960	Shldr disartic switch contro	\$13,095.93	\$13,095.93	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6965	Shldr disartic myoelectronic	\$14,789.01	\$14,789.01	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6970	Interscapular-thor switch ct	\$14,683.68	\$14,683.68	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L6975	Interscap-thor myoelectronic	\$16,088.66	\$16,088.66	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7010	Hand otto back steeper/eq sw	\$3,713.26	\$3,713.26	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7015	Hand sys teknik village swit	\$6,111.23	\$6,111.23	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7020	Electronic greifer switch ct	\$3,631.10	\$3,631.10	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7025	Electron hand myoelectronic	\$3,505.81	\$3,505.81	0	0%	0%	0%	0	0	0	0	0	0		F	Y

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L7030	Hand sys teknik vill myoelec	\$6,071.70	\$6,071.70	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7035	Electron greifer myoelectro	\$3,807.85	\$3,807.85	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7040	Prehensile actuator hosmer s	\$3,032.45	\$3,032.45	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7045	Electron hook child michigan	\$1,627.28	\$1,627.28	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7170	Electronic elbow hosmer swit	\$6,147.45	\$6,147.45	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7180	Electronic elbow utah myoele	\$36,885.74	\$36,885.74	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7185	Electron elbow adolescent sw	\$6,457.13	\$6,457.13	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7186	Electron elbow child switch	\$8,905.44	\$8,905.44	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7190	Elbow adolescent myoelectron	\$8,021.72	\$8,021.72	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7191	Elbow child myoelectronic ct	\$9,305.67	\$9,305.67	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7260	Electron wrist rotator otto	\$2,285.13	\$2,285.13	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7261	Electron wrist rotator utah	\$4,789.32	\$4,789.32	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7266	Servo control steeper or equ	\$996.78	\$996.78	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7272	Analogue control unb or equa	\$2,400.36	\$2,400.36	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7274	Proportional ctl 12 volt uta	\$7,161.74	\$7,161.74	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7360	Six volt bat otto bock/eq ea	\$267.21	\$267.21	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7362	Battery chrgr six volt otto	\$276.96	\$276.96	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7364	Twelve volt battery utah/equ	\$524.62	\$524.62	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7366	Battery chrgr 12 volt utah/e	\$678.10	\$678.10	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7367	Replacemnt lithium ionbatter	\$384.79	\$384.79	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7368	Lithium ion battery charger	\$498.81	\$498.81	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L7499	Upper extremity prosthes NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L7500	Prosthetic dvc repair hourly	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L7510	Prosthetic device repair rep	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L7520	Repair prosthesis per 15 min	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L7900	Vacuum erection system	\$535.17	\$535.17	0	0%	0%	0%	0	0	0	0	0	0		F	
L8000	Mastectomy bra	\$41.59	\$41.59	0	0%	0%	0%	0	0	0	0	0	0		F	
L8001	Breast prosthesis bra & form	\$123.96	\$123.96	0	0%	0%	0%	0	0	0	0	0	0		F	
L8002	Brst prsth bra & bilat form	\$163.05	\$163.05	0	0%	0%	0%	0	0	0	0	0	0		F	
L8010	Mastectomy sleeve	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L8015	Ext breastprosthesis garment	\$61.53	\$61.53	0	0%	0%	0%	0	0	0	0	0	0		F	
L8020	Mastectomy form	\$242.56	\$242.56	0	0%	0%	0%	0	0	0	0	0	0		F	
L8030	Breast prosthesis silicone/e	\$317.62	\$317.62	0	0%	0%	0%	0	0	0	0	0	0		F	
L8035	Custom breast prosthesis	\$3,620.94	\$3,620.94	0	0%	0%	0%	0	0	0	0	0	0		F	
L8039	Breast prosthesis NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L8040	Nasal prosthesis	\$2,471.02	\$2,471.02	0	0%	0%	0%	0	0	0	0	0	0		F	
L8041	Midfacial prosthesis	\$2,978.58	\$2,978.58	0	0%	0%	0%	0	0	0	0	0	0		F	
L8042	Orbital prosthesis	\$3,346.70	\$3,346.70	0	0%	0%	0%	0	0	0	0	0	0		F	

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
L8043	Upper facial prosthesis	\$3,748.31	\$3,748.31	0	0%	0%	0%	0	0	0	0	0	0			F
L8044	Hemi-facial prosthesis	\$4,149.91	\$4,149.91	0	0%	0%	0%	0	0	0	0	0	0			F
L8045	Auricular prosthesis	\$2,605.05	\$2,605.05	0	0%	0%	0%	0	0	0	0	0	0			F
L8046	Partial facial prosthesis	\$2,677.35	\$2,677.35	0	0%	0%	0%	0	0	0	0	0	0			F
L8047	Nasal septal prosthesis	\$1,372.14	\$1,372.14	0	0%	0%	0%	0	0	0	0	0	0			F
L8048	Unspec maxillofacial prosth	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8049	Repair maxillofacial prosth	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8100	Compression stocking BK18-30	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8110	Compression stocking BK30-40	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8120	Compression stocking BK40-50	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8130	Gc stocking thighlngh 18-30	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8140	Gc stocking thighlngh 30-40	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8150	Gc stocking thighlngh 40-50	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8160	Gc stocking full lngth 18-30	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8170	Gc stocking full lngth 30-40	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8180	Gc stocking full lngth 40-50	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8190	Gc stocking waistlngth 18-30	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8195	Gc stocking waistlngth 30-40	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8200	Gc stocking waistlngth 40-50	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8210	Gc stocking custom made	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8220	Gc stocking lymphedema	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8230	Gc stocking garter belt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8239	G compression stocking NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
L8300	Truss single w/ standard pad	\$105.51	\$105.51	0	0%	0%	0%	0	0	0	0	0	0			F
L8310	Truss double w/ standard pad	\$147.78	\$147.78	0	0%	0%	0%	0	0	0	0	0	0			F
L8320	Truss addition to std pad wa	\$56.27	\$56.27	0	0%	0%	0%	0	0	0	0	0	0			F
L8330	Truss add to std pad scrotal	\$49.70	\$49.70	0	0%	0%	0%	0	0	0	0	0	0			F
L8400	Sheath below knee	\$18.68	\$18.68	0	0%	0%	0%	0	0	0	0	0	0			F
L8410	Sheath above knee	\$26.61	\$26.61	0	0%	0%	0%	0	0	0	0	0	0			F
L8415	Sheath upper limb	\$27.33	\$27.33	0	0%	0%	0%	0	0	0	0	0	0			F
L8417	Pros sheath/sock w gel cushn	\$74.32	\$74.32	0	0%	0%	0%	0	0	0	0	0	0			F
L8420	Prosthetic sock multi ply BK	\$20.21	\$20.21	0	0%	0%	0%	0	0	0	0	0	0			F
L8430	Prosthetic sock multi ply AK	\$23.07	\$23.07	0	0%	0%	0%	0	0	0	0	0	0			F
L8435	Pros sock multi ply upper lm	\$28.22	\$28.22	0	0%	0%	0%	0	0	0	0	0	0			F
L8440	Shrinker below knee	\$42.11	\$42.11	0	0%	0%	0%	0	0	0	0	0	0			F
L8460	Shrinker above knee	\$87.86	\$87.86	0	0%	0%	0%	0	0	0	0	0	0			F
L8465	Shrinker upper limb	\$49.11	\$49.11	0	0%	0%	0%	0	0	0	0	0	0			F
L8470	Pros sock single ply BK	\$6.72	\$6.72	0	0%	0%	0%	0	0	0	0	0	0			F

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L8480	Pros sock single ply AK	\$12.35	\$12.35	0	0%	0%	0%	0	0	0	0	0	0		F	
L8485	Pros sock single ply upper l	\$14.47	\$14.47	0	0%	0%	0%	0	0	0	0	0	0		F	
L8490	Air seal suction reten systm	\$150.81	\$150.81	0	0%	0%	0%	0	0	0	0	0	0		F	
L8499	Unlisted misc prosthetic ser	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L8500	Artificial larynx	\$786.00	\$786.00	0	0%	0%	0%	0	0	0	0	0	0		F	
L8501	Tracheostomy speaking valve	\$121.62	\$121.62	0	0%	0%	0%	0	0	0	0	0	0		F	
L8505	Artificial larynx, accessory	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L8507	Trach-esoph voice pros pt in	\$41.40	\$41.40	0	0%	0%	0%	0	0	0	0	0	0		F	
L8509	Trach-esoph voice pros md in	\$107.94	\$107.94	0	0%	0%	0%	0	0	0	0	0	0		F	
L8510	Voice amplifier	\$249.74	\$249.74	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8511	Indwelling trach insert	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L8512	Gel cap for trach voice pros	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L8513	Trach pros cleaning device	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L8514	Repl trach puncture dilator	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L8600	Implant breast silicone/eq	\$734.23	\$734.23	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8603	Collagen imp urinary 2.5 ml	\$354.78	\$354.78	0	0%	0%	0%	9	0	0	0	0	0		F	Y
L8606	Synthetic implnt urinary 1ml	\$224.89	\$224.89	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8610	Ocular implant	\$667.87	\$667.87	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8612	Aqueous shunt prosthesis	\$729.12	\$729.12	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8613	Ossicular implant	\$303.03	\$303.03	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8614	Cochlear device/system	\$18,913.05	\$18,913.05	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8619	Replace cochlear processor	\$8,119.23	\$8,119.23	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8630	Metacarpophalangeal implant	\$339.19	\$339.19	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8631	MCP joint repl 2 pc or more	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L8641	Metatarsal joint implant	\$469.89	\$469.89	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8642	Hallux implant	\$309.22	\$309.22	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8658	Interphalangeal joint implnt	\$409.69	\$409.69	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8659	Interphalangeal joint repl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	Y
L8670	Vascular graft, synthetic	\$560.41	\$560.41	0	0%	0%	0%	0	0	0	0	0	0		F	Y
L8699	Prosthetic implant NOS	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
L9900	O&P supply/accessory/service	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
M0064	Visit for drug monitoring	\$36.45	\$25.32	0	0%	0%	0%	0	0	0	0	0	0		R	
M0075	Cellular therapy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
M0076	Prolotherapy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
M0100	Intragastric hypothermia	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
M0300	IV chelationtherapy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
M0301	Fabric wrapping of aneurysm	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
P2028	Cephalin flocculation test	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

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CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
P2029	Congo red blood test	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P2031	Hair analysis	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
P2033	Blood thymol turbidity	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P2038	Blood mucoprotein	\$9.83	\$9.83	0	0%	0%	0%	9	9	9	9	9	9			L
P3000	Screen pap by tech w md supv	\$20.66	\$20.66	0	0%	0%	0%	9	9	9	9	9	9			L
P3001	Screening pap smear by phys	\$30.88	\$30.88	0	0%	0%	0%	0	0	0	0	0	0			R
P7001	Culture bacterial urine	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
P9010	Whole blood for transfusion	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9011	Blood split unit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9012	Cryoprecipitate each unit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9016	RBC leukocytes reduced	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9017	One donor fresh frozn plasma	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9019	Platelets, each unit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9020	Plaelet rich plasma unit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9021	Red blood cells unit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9022	Washed red blood cells unit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9023	Frozen plasma, pooled, sd	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9031	Platelets leukocytes reduced	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9032	Platelets, irradiated	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9033	Platelets leukoreduced irradi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9034	Platelets, pheresis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9035	Platelet pheres leukoreduced	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9036	Platelet pheresis irradiated	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9037	Plate pheres leukoredu irradi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9038	RBC irradiated	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9039	RBC deglycerolized	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9040	RBC leukoreduced irradiated	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9041	Albumin (human),5%, 50ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
P9043	Plasma protein fract,5%,50ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
P9044	Cryoprecipitatereducedplasma	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9045	Albumin (human), 5%, 250 ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
P9046	Albumin (human), 25%, 20 ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
P9047	Albumin (human), 25%, 50ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
P9048	Plasmaprotein fract,5%,250ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
P9050	Granulocytes, pheresis unit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9051	Blood, l/r, cmv-neg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9052	Platelets, hla-m, l/r, unit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9053	Plt, pher, l/r cmv-neg, irr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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HPCPS
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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
P9054	Blood, l/r, froz/degly/wash	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9055	Plt, aph/pher, l/r, cmv-neg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9056	Blood, l/r, irradiated	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9057	RBC, frz/deg/wsh, l/r, irradiat	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9058	RBC, l/r, cmv-neg, irradiat	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9059	Plasma, frz between 8-24hour	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9060	Fr frz plasma donor retested	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
P9603	One-way allow prorated miles	\$0.81	\$0.81	0	0%	0%	0%	9	9	9	9	9	9			F
P9604	One-way allow prorated trip	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
P9612	Catheterize for urine spec	\$4.20	\$4.20	0	0%	0%	0%	9	9	9	9	9	9			L
P9615	Urine specimen collect mult	\$4.20	\$4.20	0	0%	0%	0%	9	9	9	9	9	9			L
Q0035	Cardiokymography	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
Q0035-26	Cardiokymography	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
Q0035-TC	Cardiokymography	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0			X
Q0081	Infusion ther other than che	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
Q0083	Chemo by other than infusion	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
Q0084	Chemotherapy by infusion	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
Q0085	Chemo by both infusion and o	Hosp. Only	Hosp. Only	0	0%	0%	0%	0	0	0	0	0	0			O
Q0091	Obtaining screen pap smear	\$53.16	\$26.33	0	0%	0%	0%	0	0	0	0	0	0			R
Q0092	Set up port xray equipment	\$16.71	\$16.71	0	0%	0%	0%	3	0	0	0	0	0			R
Q0111	Wet mounts/ w preparations	\$8.34	\$8.34	0	0%	0%	0%	9	9	9	9	9	9			L
Q0112	Potassium hydroxide preps	\$8.34	\$8.34	0	0%	0%	0%	9	9	9	9	9	9			L
Q0113	Pinworm examinations	\$10.58	\$10.58	0	0%	0%	0%	9	9	9	9	9	9			L
Q0114	Fern test	\$13.99	\$13.99	0	0%	0%	0%	9	9	9	9	9	9			L
Q0115	Post-coital mucous exam	\$19.36	\$19.36	0	0%	0%	0%	9	9	9	9	9	9			L
Q0136	Non esrd epoetin alpha inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0137	Darbepoetin alfa, non-esrd	\$5.00	\$5.00	0	0%	0%	0%	9	9	9	9	9	9			D
Q0144	Azithromycin dihydrate, oral	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q0163	Diphenhydramine HCl 50mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0164	Prochlorperazine maleate 5mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0165	Prochlorperazine maleate10mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0166	Granisetron HCl 1 mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0167	Dronabinol 2.5mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0168	Dronabinol 5mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0169	Promethazine HCl 12.5mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0170	Promethazine HCl 25 mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0171	Chlorpromazine HCl 10mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0172	Chlorpromazine HCl 25mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D

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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
Q0173	Trimethobenzamide HCl 250mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0174	Thiethylperazine maleate10mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0175	Perphenazine 4mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0176	Perphenazine 8mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0177	Hydroxyzine pamoate 25mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0178	Hydroxyzine pamoate 50mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0179	Ondansetron HCl 8mg oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0180	Dolasetron mesylate oral	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0181	Unspecified oral anti-emetic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q0182	Nonmetabolic act d/e tissue	\$29.92	\$29.92	0	0%	0%	0%	9	9	9	9	9	9			D
Q0183	Nonmetabolic active tissue	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q0187	Factor viia recombinant	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q1001	Ntiol category 1	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q1002	Ntiol category 2	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q1003	Ntiol category 3	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q1004	Ntiol category 4	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q1005	Ntiol category 5	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q2001	Oral cabergoline 0.5 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q2002	Elliotts b solution per ml	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q2003	Aprotinin, 10,0 kiu	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2004	Bladder calculi irrig sol	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2005	Corticorelin ovine triflutat	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q2006	Digoxin immune fab (ovine)	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2007	Ethanolamine oleate 100 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q2008	Fomepizole, 15 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2009	Fosphenytoin, 50 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2011	Hemin, per 1 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2012	Pegademase bovine, 25 iu	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q2013	Pentastarch 10% solution	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2014	Sermorelin acetate, 0.5 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q2017	Teniposide, 50 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2018	Urofollitropin, 75 iu	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q2019	Basiliximab	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2020	Histrelin acetate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2021	Lepirudin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q2022	VonWillebrandFactrCmplxperIU	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
Q3000	Rubidium RB-82	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0			N
Q3001	Brachytherapy Radioelements	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
Q3002	Gallium ga 67	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3003	Technetium tc99m bicipate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3004	Xenon xe 133	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3005	Technetium tc99m mertiatide	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3006	Technetium tc99m gluceptate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3007	Sodium phosphate p32	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3008	Indium 111-in pentetretotide	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3009	Technetium tc99m oxidronate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3010	Technetium tc99mlabeledrbcs	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3011	Chromic phosphate p32	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3012	Cyanocobalamin cobalt co57	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3014	Telehealth facility fee	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q3019	ALS emer trans no ALS serv	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3020	ALS nonemer trans no ALS ser	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q3025	IM inj interferon beta 1-a	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q3026	Subc inj interferon beta-1a	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q3031	Collagen skin test	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
Q4001	Cast sup body cast plaster	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4002	Cast sup body cast fiberglas	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4003	Cast sup shoulder cast plstr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4004	Cast sup shoulder cast fbrgl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4005	Cast sup long arm adult plst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4006	Cast sup long arm adult fbrg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4007	Cast sup long arm ped plaster	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q4008	Cast sup long arm ped fbrgls	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q4009	Cast sup sht arm adult plstr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4010	Cast sup sht arm adult fbrgl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4011	Cast sup sht arm ped plaster	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q4012	Cast sup sht arm ped fbrglas	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q4013	Cast sup gauntlet plaster	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4014	Cast sup gauntlet fiberglass	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4015	Cast sup gauntlet ped plaster	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q4016	Cast sup gauntlet ped fbrgls	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q4017	Cast sup lng arm splint plst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4018	Cast sup lng arm splint fbrg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
Q4019	Cast sup lng arm splnt ped p	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q4020	Cast sup lng arm splnt ped f	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
Q4021	Cast sup sht arm splint plst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
Q4022	Cast sup sht arm splint fbrg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4023	Cast sup sht arm splnt ped p	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4024	Cast sup sht arm splnt ped f	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4025	Cast sup hip spica plaster	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4026	Cast sup hip spica fiberglas	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4027	Cast sup hip spica ped plstr	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4028	Cast sup hip spica ped fbrgl	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4029	Cast sup long leg plaster	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4030	Cast sup long leg fiberglass	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4031	Cast sup lng leg ped plaster	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4032	Cast sup lng leg ped fbrgls	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4033	Cast sup lng leg cylinder pl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4034	Cast sup lng leg cylinder fb	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4035	Cast sup lngleg cylndr ped p	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4036	Cast sup lngleg cylndr ped f	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4037	Cast sup shrt leg plaster	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4038	Cast sup shrt leg fiberglass	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4039	Cast sup shrt leg ped plster	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4040	Cast sup shrt leg ped fbrgls	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4041	Cast sup lng leg splnt plstr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4042	Cast sup lng leg splnt fbrgl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4043	Cast sup lng leg splnt ped p	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4044	Cast sup lng leg splnt ped f	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4045	Cast sup sht leg splnt plstr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4046	Cast sup sht leg splnt fbrgl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4047	Cast sup sht leg splnt ped p	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4048	Cast sup sht leg splnt ped f	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
Q4049	Finger splint, static	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4050	Cast supplies unlisted	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4051	Splint supplies misc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
Q4054	Darbepoetin alfa, esrd use	\$5.00	\$5.00	0	0%	0%	0%	9	9	9	9	9	9			D
Q4055	Epoetin alfa, esrd use	\$13.38	\$13.38	0	0%	0%	0%	9	9	9	9	9	9			D
Q4075	Acyclovir, 5 mg	\$0.49	\$0.49	0	0%	0%	0%	9	9	9	9	9	9			D
Q4076	Dopamine hcl, 40 mg	\$0.65	\$0.65	0	0%	0%	0%	9	9	9	9	9	9			D
Q4077	Treprostinil, 1 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
R0070	Transport portable x-ray	\$84.55	\$84.55	0	0%	0%	0%	3	0	0	0	0	0			R
R0075	Transport port x-ray multipl	\$35.95	\$35.95	0	0%	0%	0%	3	0	0	0	0	0			R
R0076	Transport portable EKG	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective July 1, 2004

HCPCS		DOLLAR VALUE		MODIFIERS												LIC
CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
S0012	Butorphanol tartrate, nasal	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0014	Tacrine hydrochloride, 10 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0016	Injection, amikacin sulfate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0017	Injection, aminocaproic acid	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0020	Injection, bupivacaine hydro	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0021	Injection, cefoperazone sod	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0023	Injection, cimetidine hydroc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0028	Injection, famotidine, 20 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0030	Injection, metronidazole	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0032	Injection, nafcillin sodium	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0034	Injection, ofloxacin, 400 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0039	Injection, sulfamethoxazole	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0040	Injection, ticarcillin disod	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0071	Injection, acyclovir sodium	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0072	Injection, amikacin sulfate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0073	Injection, aztreonam, 500 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0074	Injection, cefotetan disodiu	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0077	Injection, clindamycin phosp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0078	Injection, fosphenytoin sodi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0080	Injection, pentamidine iseth	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0081	Injection, piperacillin sodi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0088	Imatinib 100 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0090	Sildenafil citrate, 25 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0091	Granisetron 1mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0092	Hydromorphone 250 mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9			O
S0093	Morphine 500 mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9			O
S0104	Zidovudine, oral, 100 mg	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S0106	Bupropion HCL SR 60 tablets	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0107	Inj, omalizumab 25 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0108	Mercaptopurine 50 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0114	Treprostinil sodium inject	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0115	Bortezomib 3.5 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0116	Bevacizumab, 100 mg	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
S0117	Tretinoin topical, 5g	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
S0122	Inj menotropins 75 iu	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0126	Inj follitropin alfa 75 iu	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0128	Inj follitropin beta 75 iu	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0132	Inj ganirelix acetat 250 mcg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
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HPCPS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S0136	Clozapine, 25 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0137	Didanosine, 25 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0138	Finasteride, 5 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0139	Minoxidil, 10 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0140	Saquinavir, 200 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0141	Zalcitabine, 0.375 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0155	Epoprostenol dilutant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S0156	Exemestane, 25 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0157	Becaplermin gel 1%, 0.5 gm	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0158	Injection laronidase	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0159	Injection agalsidase	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0160	Dextroamphetamine	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0161	Calcitriol	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0162	Injection efalizumab	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0163	Injection risperidone LA	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0164	Injection pantoprazole	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0165	Injection abarelix	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0170	Anastrozole 1 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0171	Bumetanide 0.5 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0172	Chlorambucil 2 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0173	Dexamethasone 4 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0174	Dolasetron 50 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0175	Flutamide 125 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0176	Hydroxyurea 500 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0177	Levamisole 50 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0178	Lomustine 10 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0179	Megestrol 20 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0181	Ondansetron 4 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0182	Procarbazine 5 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0183	Prochlorperazine 5 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0187	Tamoxifen 10 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0189	Testosterone pellet 75 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0190	Mifepristone, oral, 200 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0191	Misoprostol, oral, 200 mcg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9			D
S0194	Vitamin suppl 100 caps	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0195	Pneumococcal conjugate vac	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0199	Med abortion inc all ex drug	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0201	Partial hospitalization serv	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X

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Professional Services Fee Schedule

HCPCS
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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S0207	Paramedicintercep nonhospals	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S0208	Paramed intrcept nonvol	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0209	WC van mileage per mi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0215	Nonemerg transp mileage	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0220	Medical conference by physic	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0221	Medical conference, 60 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0250	Comp geriatr assmt team	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0255	Hospice refer visit nonmd	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0260	H&P for surgery	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0302	Completed EPSDT	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0310	Hospitalist visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0315	Disease management program	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S0316	Follow-up/reassessment	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S0317	Disease mgmt per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0320	RN telephone calls to DMP	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S0340	Lifestyle mod 1st stage	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0341	Lifestyle mod 2 or 3 stage	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0342	Lifestyle mod 4th stage	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0390	Rout foot care per visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0395	Impression casting ft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
S0400	Global eswl kidney	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0500	Dispos cont lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0504	Singl prscrp lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0506	Bifoc prscrp lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0508	Trifoc prscrp lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0510	Non-prscrp lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0512	Daily cont lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0514	Color cont lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0516	Safety frames	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0518	Sunglass frames	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0580	Polycarb lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0581	Nonstd lens	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0590	Misc integral lens serv	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0592	Comp cont lens eval	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0601	Screening proctoscopy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0605	Digital rectal examination,	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0610	Annual gynecological examina	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S0612	Annual gynecological examina	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective July 1, 2004

HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
S0618	Audiometry for hearing aid	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0620	Routine ophthalmological exa	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0621	Routine ophthalmological exa	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0622	Phys exam for college	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0630	Removal of sutures	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0800	Laser in situ keratomileusis	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0810	Photorefractive keratectomy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0812	Phototherap keratect	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0820	Computerized corneal topogra	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S0830	Ultrasound pachymetry	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S1001	Deluxe item	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S1002	Custom item	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S1015	IV tubing extension set	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S1016	Non-pvc intravenous administ	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S1025	Inhal nitric oxide neonate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S1030	Gluc monitor purchase	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S1031	Gluc monitor rental	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S1040	Cranial remolding orthosis	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S2053	Transplantation of small int	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2054	Transplantation of multivisc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2055	Harvesting of donor multivis	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2060	Lobar lung transplantation	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2061	Donor lobectomy (lung)	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2065	Simult panc kidn trans	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2070	Cysto laser tx ureteral calc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2080	Laup	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2082	Lap adjustable gastric band	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2083	Adjustment gastric band	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2085	Laparoscop gastric bypass	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2090	Open cryosurg renal	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2091	Perc cryosurg renal	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2095	Transcath emboliz microspher	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2102	Islet cell tissue transplant	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2103	Adrenal tissue transplant	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2107	Adoptive immunotherapy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2112	Knee arthroscop harv	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S2113	Arthro chondrocyte implant	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2115	Periacetabular osteotomy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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Professional Services Fee Schedule

HCPCS
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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S2120	Low density lipoprotein(LDL)	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2130	ERA of reflux saphenous vein	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2131	Laser ablat saphenous vein	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2135	Neurolysis interspace foot	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2140	Cord blood harvesting	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2142	Cord blood-derived stem-cell	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2150	BMT harv/transpl 28d pkg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2152	Solid organ transpl pkg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2202	Echosclerotherapy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2205	Minimally invasive direct co	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2206	Minimally invasive direct co	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2207	Minimally invasive direct co	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2208	Minimally invasive direct co	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2209	Minimally invasive direct co	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2211	Transv carotid stent placemt	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2213	Implant gastric stim	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2225	Myringotomy laser-assist	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2230	Implant semi-imp hear	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2235	Implant auditory brain imp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2250	Uterine artery emboliz	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2255	Hysterosc oviduct occlus	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2260	Induced abortion 17-24 weeks	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2262	Abortion maternal indic >=25w	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S2265	Abortion 25-28wks fetal indi	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S2266	Abortion 29-31wks fetal indi	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S2267	Abortion >=32wks fetal indic	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S2300	Arthroscopy, shoulder, surgi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2340	Chemodenervation of abductor	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2341	Chemodenerv adduct vocal	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2342	Nasal endoscop po debrid	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2350	Disectomy, anterior, with d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2351	Disectomy, anterior, with d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2360	Vertebroplast cerv 1st	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2361	Vertebroplast cerv addl	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2362	Kyphoplasty, first vertebra	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2363	Kyphoplasty, each addl	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2370	Intradiscal electrothermal	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S2371	Each additional interspace	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	

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HCPCS
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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S2400	Fetal surg congen hernia	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2401	Fetal surg urin trac obstr	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2402	Fetal surg cong cyst malf	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2403	Fetal surg pulmon sequest	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2404	Fetal surg myelomeningo	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2405	Fetal surg sacrococ teratoma	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2409	Fetal surg noc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S2411	Fetoscop laser ther TTTS	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3000	Bilat dil retinal exam	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3600	Stat lab	\$11.39	\$11.39	0	0%	0%	0%	9	9	9	9	9	9			F
S3601	Stat lab home/nf	\$11.39	\$11.39	0	0%	0%	0%	9	9	9	9	9	9			F
S3620	Newborn metabolic screening	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3625	Maternal triple screen test	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3630	Eosinophil blood count	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3645	HIV-1 antibody testing of or	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3650	Saliva test, hormone level;	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3652	Saliva test, hormone level;	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3655	Antisperm antibodies test	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S3701	NMP-22 assay	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3708	Gastrointestinal fat absorpt	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3818	BRCA1 gene anal	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3819	BRCA2 gene anal	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3820	Comp BRCA1/BRCA2	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3822	Sing mutation brst/ovar	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3823	3 mutation brst/ovar	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3828	Comp MLH1 gene	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3829	Comp MSH2 gene	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3830	Gene test HNPCC comp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3831	Gene test HNPCC single	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3833	Comp APC sequence	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3834	Sing mutation APC	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3835	Gene test cystic fibrosis	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3837	Gene test hemochromato	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3840	DNA analysis RET-oncogene	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3841	gene test retinoblastoma	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3842	gene test Hippel-Lindau	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3843	DNA analysis Factor V	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3844	DNA analysis deafness	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
S3845	gene test alpha-thalassemia	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3846	gene test beta-thalassemia	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3847	gene test Tay-Sachs	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3848	gene test Gaucher	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3849	gene test Niemann-Pick	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3850	gene test sickle cell	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3851	gene test Canavan	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3852	DNA analysis APOE Alzheimer	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3853	Gene test myo musclr dyst	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3890	Fecal DNA analysis	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3900	Surface EMG	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3902	Ballistocardiogram	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S3904	Masters two step	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4005	Interim labor facility globa	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4011	IVF package	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4013	Compl GIFT case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4014	Compl ZIFT case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4015	Complete IVF nos case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4016	Frozen IVF case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4017	IVF canc a stim case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4018	F EMB trns canc case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4020	IVF canc a aspir case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4021	IVF canc p aspir case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4022	Asst oocyte fert case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4023	Incompl donor egg case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4025	Donor serv IVF case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4026	Procure donor sperm	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4027	Store prev froz embryos	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4028	Microsurg epi sperm asp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4030	Sperm procure init visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4031	Sperm procure subs visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4035	Stimulated IUI case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4036	Intravag cult case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4037	Cryo embryo transf case rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4040	Monit store cryo embryo 30 d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4981	Insert levonorgestrel ius	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4989	Contracept IUD	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4990	Nicotine patch legend	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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Professional Services Fee Schedule

HCPCS
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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S4991	Nicotine patch nonlegend	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4993	Contraceptive pills for bc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S4995	Smoking cessation gum	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5000	Prescription drug, generic	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5001	Prescription drug,brand name	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5010	5% dextrose and 0.45% saline	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5011	5% dextrose in lactated ring	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5012	5% dextrose with potassium	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5013	5%dextrose/0.45%saline10ml	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5014	D5W/0.45NS w KCl and MGS04	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5035	HIT routine device maint	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5036	HIT device repair	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5100	Adult daycare services 15min	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5101	Adult day care per half day	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5102	Adult day care per diem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5105	Centerbased daycare perdiem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5108	Homecare train pt 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5109	Homecare train pt session	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S5110	Family homecare training 15m	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5111	Family homecare train/sessio	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5115	Nonfamily homecare train/15m	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5116	Nonfamily HC train/session	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5120	Chore services per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5121	Chore services per diem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5125	Attendant care service /15m	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5126	Attendant care service /diem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5130	Homemaker service nos /15m	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5131	homemaker service nos /diem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5135	Adult companioncare per 15m	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5136	Adult companioncare per diem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5140	Adult foster care per diem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5141	Adult foster care per month	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5145	Child fostercare th per diem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5146	Ther fostercare child /month	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5150	Unskilled respite care /15m	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5151	Unskilled respitecare /diem	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5160	Emer response sys install&ts	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X
S5161	Emer rspons sys serv permonth	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0			X

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective July 1, 2004

HPCPS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S5162	Emer rspns system purchase	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5165	Home modifications per serv	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5170	Homedelivered prepared meal	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5175	Laundry serv,ext,prof,/order	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5180	HH respiratory thrpy in eval	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5181	HH respiratory thrpy nos/day	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5185	Med reminder serv per month	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5190	Wellness assessment by nonph	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5199	Personal care item nos each	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S5497	HIT cath care noc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5498	HIT simple cath care	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5501	HIT complex cath care	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5502	HIT interim cath care	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5517	HIT declotting kit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5518	HIT cath repair kit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5520	HIT picc insert kit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5521	HIT midline cath insert kit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5522	HIT picc insert no supp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5523	HIP midline cath insert kit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5550	Insulin rapid 5 u	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5551	Insulin most rapid 5 u	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5552	Insulin intermed 5 u	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5553	Insulin long acting 5 u	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5560	Insulin reuse pen 1.5 ml	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5561	Insulin reuse pen 3 ml	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5565	Insulin cartridge 150 u	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5566	Insulin cartridge 300 u	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5570	Insulin dispos pen 1.5 ml	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S5571	Insulin dispos pen 3 ml	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S8004	Wholebody radiopharm trgccl	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
S8030	Tantalum ring application	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S8035	Magnetic source imaging	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S8037	mrpcp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S8040	Topographic brain mapping	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S8042	MRI low field	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S8049	Intraoperative radiation the	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S8055	Us guidance fetal reduct	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S8075	CAD of digital mammogr	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	

Washington State Department of Labor & Industries
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HCPCS
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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S8080	Scintimammography	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8085	Fluorine-18 fluorodeoxygluco	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8092	Electron beam computed tomog	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8095	Wig (for medically-induced h	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8096	Portable peak flow meter	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8097	Asthma kit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8100	Spacer without mask	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8101	Spacer with mask	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8110	Peak expiratory flow rate (p	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8120	O2 contents gas cubic ft	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8121	O2 contents liquid lb	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8182	Humidifier non-servo	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8183	Humidifier dual servo	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8185	Flutter device	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8186	Swivel adaptor	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8189	Trach supply noc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8190	Electronic spirometer	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8210	Mucus trap	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8260	Oral orthotic for treatment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8262	Mandib ortho repos device	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8265	Haberman feeder	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8301	Infect control supplies NOS	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8415	Supplies for home delivery	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8420	Custom gradient sleeve/glov	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8421	Ready gradient sleeve/glov	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8422	Custom grad sleeve med	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8423	Custom grad sleeve heavy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8424	Ready gradient sleeve	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8425	Custom grad glove med	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8426	Custom grad glove heavy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8427	Ready gradient glove	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8428	Ready gradient gauntlet	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8429	Gradient pressure wrap	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8430	Padding for comprssn bdg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8431	Compression bandage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S8450	Splint digit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8451	Splint wrist or ankle	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8452	Splint elbow	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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HPCPS
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HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S8460	Camisole post-mast	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8490	100 insulin syringes	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8948	Low-level laser trmt 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8950	Complex lymphedema therapy,	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8990	PT or manip for maint	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S8999	Resuscitation bag	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9001	Home uterine monitor with or	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9007	Ultrafiltration monitor	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9015	Automated EEG monitoring	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9022	Digital subtraction angiogra	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9024	Paranasal sinus ultrasound	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9025	Omniscardiogram/cardiointegra	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9034	ESWL for gallstones	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9055	Procuren or other growth fac	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9056	Coma stimulation per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9061	Medical supplies and equipme	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9075	Smoking cessation treatment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9083	Urgent care center global	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9088	Services provided in urgent	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9090	Vertebral axial decompressio	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9092	Canolith repositioning	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9098	Home phototherapy visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9109	CHF telemonitoring month	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9117	Back school visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9122	Home health aide or certifie	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9123	Nursing care, in the home; b	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9124	Nursing care, in the home; b	\$36.41	\$36.41	0	0%	0%	0%	9	9	9	9	9	9			F
S9125	Respite care, in the home, p	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9126	Hospice care, in the home, p	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
S9127	Social work visit, in the ho	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9128	Speech therapy, in the home,	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9129	Occupational therapy, in the	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9131	PT in the home per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9140	Diabetic Management Program,	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9141	Diabetic Management Program,	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9145	Insulin pump initiation	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9150	Evaluation by ocularist	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9208	Home mgmt preterm labor	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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HPCPS
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HPCPS		DOLLAR VALUE		MODIFIERS												LIC
CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
S9209	Home mgmt PPRM	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9211	Home mgmt gest hypertension	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9212	Hm postpar hyper per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9213	Hm preeclamp per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9214	Hm gest dm per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9325	HIT pain mgmt per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9326	HIT cont pain per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9327	HIT int pain per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9328	HIT pain imp pump diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9329	HIT chemo per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9330	HIT cont chem diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9331	HIT intermit chemo diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9335	HT hemodialysis diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9336	HIT cont anticoag diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9338	HIT immunotherapy diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9339	HIT periton dialysis diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9340	HIT enteral per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9341	HIT enteral grav diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9342	HIT enteral pump diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9343	HIT enteral bolus nurs	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9345	HIT anti-hemophil diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9346	HIT alpha-1-protein diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9347	HIT longterm infusion diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9348	HIT sympathomim diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9349	HIT tocolysis diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9351	HIT cont antiemetic diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9353	HIT cont insulin diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9355	HIT chelation diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9357	HIT enzyme replace diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9359	HIT anti-tnf per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9361	HIT diuretic infus diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9363	HIT anti-spasmodic diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9364	HIT tpn total diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9365	HIT tpn 1 liter diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9366	HIT tpn 2 liter diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9367	HIT tpn 3 liter diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9368	HIT tpn over 3l diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9370	HT inj antiemetic diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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Professional Services Fee Schedule

HPCPS
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HPCPS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
S9372	HT inj anticoag diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9373	HIT hydra total diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9374	HIT hydra 1 liter diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9375	HIT hydra 2 liter diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9376	HIT hydra 3 liter diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9377	HIT hydra over 3l diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9379	HIT noc per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9381	HIT high risk/escort	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9401	Anticoag clinic per session	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9430	Pharmacy comp/disp serv	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9434	Mod solid food suppl	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9435	Medical foods for inborn err	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9436	Lamaze class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9437	Childbirth refresher class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9438	Cesarean birth class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9439	VBAC class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9441	Asthma education	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9442	Birthing class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9443	Lactation class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9444	Parenting class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9445	PT education noc individ	\$33.52	\$33.52	0	0%	0%	0%	9	9	9	9	9	9		F	
S9446	PT education noc group	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9447	Infant safety class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9449	Weight mgmt class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9451	Exercise class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9452	Nutrition class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9453	Smoking cessation class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9454	Stress mgmt class	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9455	Diabetic Management Program,	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9460	Diabetic Management Program,	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9465	Diabetic Management Program,	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9470	Nutritional counseling, diet	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9472	Cardiac rehabilitation progr	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9473	Pulmonary rehabilitation pro	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9474	Enterostomal therapy by a re	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9475	Ambulatory setting substance	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9476	Vestibular rehab per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
S9480	Intensive outpatient psychia	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
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HPCPS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
S9484	Crisis intervention per hour	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9485	Crisis intervention mental h	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9490	HIT corticosteroid diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9494	HIT antibiotic total diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9497	HIT antibiotic q3h diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9500	HIT antibiotic q24h diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9501	HIT antibiotic q12h diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9502	HIT antibiotic q8h diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9503	HIT antibiotic q6h diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9504	HIT antibiotic q4h diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9529	Venipuncture home/snf	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9537	HT hem horm inj diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9538	HIT blood products diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9542	HT inj noc per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9558	HT inj growth horm diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9559	HIT inj interferon diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9560	HT inj hormone diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9562	Palivizumab home inj perdiem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9590	In home irrigation therapy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9810	HT pharm per hour	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9900	Christian Sci Pract visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9970	Health club membership yr	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9975	Transplant related per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9976	Lodging per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9977	Meals per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9981	Med record copy admin	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9982	Med record copy per page	\$0.42	\$0.42	0	0%	0%	0%	9	9	9	9	9	9			F
S9986	Not medically necessary svc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9988	Serv part of phase I trial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9989	Services outside US	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9990	Services provided as part of	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9991	Services provided as part of	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9992	Transportation costs to and	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9994	Lodging costs (e.g. hotel ch	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9996	Meals for clinical trial par	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
S9999	Sales tax	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1000	Private duty/independent nsg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1001	Nursing assessment/evaluatn	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
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HCPCS CPT ^(c) CODE		DOLLAR VALUE			MODIFIERS											
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
T1002	RN services up to 15 minutes	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1003	LPN/LVN services up to 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1004	Nsg aide service up to 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1005	Respite care service 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1006	Family/Couple Counseling	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1007	Treatment Plan Development	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1009	Child Sitting Services	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1010	Meals when Receive Services	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1012	Alcohol/Substance Abuse Skil	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1013	Sign Lang/Oral Interpreter	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1014	Telehealth transmit, per min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1015	Clinic service	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
T1016	Case management	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1017	Targeted case management	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1018	School-based IEP ser bundled	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1019	Personal care ser per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1020	Personal care ser per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1021	HH Aide or cn aide per visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1022	Contracted services per day	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1023	Program intake assessment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1024	Team evaluation & management	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1025	Ped compr care pkg, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1026	Ped compr care pkg, per hour	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1027	Family training & counseling	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1028	Home environment assessment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1029	Dwelling lead investigation	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1030	RN home care per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1031	LPN home care per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1500	Reusable diaper/pant	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
T1502	Medication admin visit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T1999	NOC retail items andsupplies	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2001	N-et; patient attend/escort	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2002	N-et; per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2003	N-et; encounter/trip	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2004	N-et; commerc carrier pass	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2005	N-et; stretcher van	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2006	Amb response & trt, no trans	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2007	Non-emer transport wait time	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

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Professional Services Fee Schedule

HCPCS
Effective July 1, 2004

HCPCS		DOLLAR VALUE			MODIFIERS											
CPT ^(c)		NON-FACILITY	FACILITY	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	LIC	
CODE	ABBREVIATED DESCRIPTION	SETTING	SETTING	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	FSI	REQ
T2010	PASRR LEVEL I	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2011	PASRR LEVEL II	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2012	Habil ed waiver, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2013	Habil ed waiver per hour	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2014	Habil prevoc waiver, per d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2015	Habil prevoc waiver per hr	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2016	Habil res waiver per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2017	Habil res waiver 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2018	Habil sup empl waiver/diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2019	Habil sup empl waiver 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2020	Day habil waiver per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2021	Day habil waiver per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2022	Case management, per month	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2023	Targeted case mgmt per month	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2024	Serv asmnt/care plan waiver	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2025	Waiver service, nos	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2026	Special childcare waiver/d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2027	Spec childcare waiver 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2028	Special supply, nos waiver	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2029	Special med equip, noswaiver	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2030	Assist living waiver/month	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2031	Assist living waiver/diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2032	Res care, nos waiver/month	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2033	Res, nos waiver per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2034	Crisis interven waiver/diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2035	Utility services waiver	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2036	Camp overnite waiver/session	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2037	Camp day waiver/session	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2038	Comm trans waiver/service	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2039	Vehicle mod waiver/service	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2040	Financial mgt waiver/15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2041	Support broker waiver/15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2042	Hospice routine home care	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2043	Hospice continuous home care	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2044	Hospice respite care	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2045	Hospice general care	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2046	Hospice long term care, r&b	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2048	Bh ltc res r&b, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective July 1, 2004

HCPCS		DOLLAR VALUE		MODIFIERS												LIC
CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
T2049	N-ET; stretcher van, mileage	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T2101	Breast milk proc/store/dist	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T5001	Special position seat/vehicl	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
T5999	Supply, nos	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V2020	Vision svcs frames purchases	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2025	Eyeglasses delux frames	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2100	Lens spher single plano 4.00	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2101	Single visn sphere 4.12-7.00	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2102	Singl visn sphere 7.12-20.00	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2103	Spherocylindr 4.00d/12-2.00d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2104	Spherocylindr 4.00d/2.12-4d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2105	Spherocylinder 4.00d/4.25-6d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2106	Spherocylinder 4.00d/>6.00d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2107	Spherocylinder 4.25d/12-2d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2108	Spherocylinder 4.25d/2.12-4d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2109	Spherocylinder 4.25d/4.25-6d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2110	Spherocylinder 4.25d/over 6d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2111	Spherocylindr 7.25d/.25-2.25	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2112	Spherocylindr 7.25d/2.25-4d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2113	Spherocylindr 7.25d/4.25-6d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2114	Spherocylinder over 12.00d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2115	Lens lenticular bifocal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2118	Lens aniseikonic single	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2121	Lenticular lens, single	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2199	Lens single vision not oth c	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2200	Lens spher bifoc plano 4.00d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2201	Lens sphere bifocal 4.12-7.0	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2202	Lens sphere bifocal 7.12-20.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2203	Lens sphcyl bifocal 4.00d/.1	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2204	Lens sphcy bifocal 4.00d/2.1	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2205	Lens sphcy bifocal 4.00d/4.2	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2206	Lens sphcy bifocal 4.00d/ove	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2207	Lens sphcy bifocal 4.25-7d/.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2208	Lens sphcy bifocal 4.25-7/2.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2209	Lens sphcy bifocal 4.25-7/4.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2210	Lens sphcy bifocal 4.25-7/ov	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2211	Lens sphcy bifo 7.25-12/.25-	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2212	Lens sphcyl bifo 7.25-12/2.2	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
V2213	Lens sphcyl bifo 7.25-12/4.2	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2214	Lens sphcyl bifocal over 12.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2215	Lens lenticular bifocal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2218	Lens aniseikonic bifocal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2219	Lens bifocal seg width over	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2220	Lens bifocal add over 3.25d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2221	Lenticular lens, bifocal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2299	Lens bifocal speciality	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2300	Lens sphere trifocal 4.00d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2301	Lens sphere trifocal 4.12-7.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2302	Lens sphere trifocal 7.12-20	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2303	Lens sphcy trifocal 4.0/.12-	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2304	Lens sphcy trifocal 4.0/2.25	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2305	Lens sphcy trifocal 4.0/4.25	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2306	Lens sphcyl trifocal 4.00/>6	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2307	Lens sphcy trifocal 4.25-7/.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2308	Lens sphc trifocal 4.25-7/2.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2309	Lens sphc trifocal 4.25-7/4.	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2310	Lens sphc trifocal 4.25-7/>6	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2311	Lens sphc trifo 7.25-12/.25-	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2312	Lens sphc trifo 7.25-12/2.25	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2313	Lens sphc trifo 7.25-12/4.25	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2314	Lens sphcyl trifocal over 12	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2315	Lens lenticular trifocal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2318	Lens aniseikonic trifocal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2319	Lens trifocal seg width > 28	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2320	Lens trifocal add over 3.25d	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2321	Lenticular lens, trifocal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2399	Lens trifocal speciality	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2410	Lens variab asphericity sing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2430	Lens variable asphericity bi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2499	Variable asphericity lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2500	Contact lens pmma spherical	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2501	Cntct lens pmma-toric/prism	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2502	Contact lens pmma bifocal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2503	Cntct lens pmma color vision	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2510	Cntct gas permeable sphericl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2511	Cntct toric prism ballast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
V2512	Cntct lens gas permbl bifocl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2513	Contact lens extended wear	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2520	Contact lens hydrophilic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2521	Cntct lens hydrophilic toric	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2522	Cntct lens hydrophil bifocl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2523	Cntct lens hydrophil extend	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2530	Contact lens gas impermeable	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2531	Contact lens gas permeable	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2599	Contact lens/es other type	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2600	Hand held low vision aids	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2610	Single lens spectacle mount	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2615	Telescop/othr compound lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2623	Plastic eye prosth custom	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2624	Polishing artifical eye	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2625	Enlargemnt of eye prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2626	Reduction of eye prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2627	Scleral cover shell	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2628	Fabrication & fitting	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2629	Prosthetic eye other type	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2630	Anter chamber intraocul lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2631	Iris support intraoclr lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2632	Post chmbr intraocular lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2700	Balance lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2710	Glass/plastic slab off prism	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2715	Prism lens/es	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2718	Fresnell prism press-on lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2730	Special base curve	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2744	Tint photochromatic lens/es	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2745	Tint, any color/solid/grad	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2750	Anti-reflective coating	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2755	UV lens/es	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2756	Eye glass case	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2760	Scratch resistant coating	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2761	Mirror coating	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2762	Polarization, any lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2770	Occluder lens/es	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2780	Oversize lens/es	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2781	Progressive lens per lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
V2782	Lens, 1.54-1.65 p/1.60-1.79g	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2783	Lens, >= 1.66 p/>=1.80 g	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2784	Lens polycarb or equal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2785	Corneal tissue processing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2786	Occupational multifocal lens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2790	Amniotic membrane	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2797	Vis item/svc in other code	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V2799	Miscellaneous vision service	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V5008	Hearing screening	\$61.62	\$61.62	0	0%	0%	0%	9	9	9	9	9	9			F
V5010	Assessment for hearing aid	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
V5011	Hearing aid fitting/checking	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
V5014	Hearing aid repair/modifying	\$157.20	\$157.20	0	0%	0%	0%	9	9	9	9	9	9			F
V5020	Conformity evaluation	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
V5030	Body-worn hearing aid air	\$696.52	\$696.52	0	0%	0%	0%	9	9	9	9	9	9			F
V5040	Body-worn hearing aid bone	\$765.34	\$765.34	0	0%	0%	0%	9	9	9	9	9	9			F
V5050	Hearing aid monaural in ear	\$769.51	\$769.51	0	0%	0%	0%	9	9	9	9	9	9			F
V5060	Behind ear hearing aid	\$913.41	\$913.41	0	0%	0%	0%	9	9	9	9	9	9			F
V5070	Glasses air conduction	\$1,028.10	\$1,028.10	0	0%	0%	0%	9	9	9	9	9	9			F
V5080	Glasses bone conduction	\$1,028.10	\$1,028.10	0	0%	0%	0%	9	9	9	9	9	9			F
V5090	Hearing aid dispensing fee	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
V5095	Implant mid ear hearing pros	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5100	Body-worn bilat hearing aid	\$1,393.04	\$1,393.04	0	0%	0%	0%	9	9	9	9	9	9			F
V5110	Hearing aid dispensing fee	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5120	Body-worn binaur hearing aid	\$1,530.68	\$1,530.68	0	0%	0%	0%	9	9	9	9	9	9			F
V5130	In ear binaural hearing aid	\$1,539.02	\$1,539.02	0	0%	0%	0%	9	9	9	9	9	9			F
V5140	Behind ear binaur hearing ai	\$1,826.82	\$1,826.82	0	0%	0%	0%	9	9	9	9	9	9			F
V5150	Glasses binaural hearing aid	\$2,056.20	\$2,056.20	0	0%	0%	0%	9	9	9	9	9	9			F
V5160	Dispensing fee binaural	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
V5170	Within ear cros hearing aid	\$1,107.35	\$1,107.35	0	0%	0%	0%	9	9	9	9	9	9			F
V5180	Behind ear cros hearing aid	\$1,332.57	\$1,332.57	0	0%	0%	0%	9	9	9	9	9	9			F
V5190	Glasses cros hearing aid	\$1,055.21	\$1,055.21	0	0%	0%	0%	9	9	9	9	9	9			F
V5200	Cros hearing aid dispens fee	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
V5210	In ear bicros hearing aid	\$1,142.80	\$1,142.80	0	0%	0%	0%	9	9	9	9	9	9			F
V5220	Behind ear bicros hearing ai	\$1,420.16	\$1,420.16	0	0%	0%	0%	9	9	9	9	9	9			F
V5230	Glasses bicros hearing aid	\$1,026.02	\$1,026.02	0	0%	0%	0%	9	9	9	9	9	9			F
V5240	Dispensing fee bicros	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
V5241	Dispensing fee, monaural	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9			B
V5242	Hearing aid, monaural, cic	\$1,259.58	\$1,259.58	0	0%	0%	0%	9	9	9	9	9	9			F

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CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	
V5243	Hearing aid, monaural, itc	\$942.60	\$942.60	0	0%	0%	0%	9	9	9	9	9	9			F
V5244	Hearing aid, prog, mon, cic	\$2,154.22	\$2,154.22	0	0%	0%	0%	9	9	9	9	9	9			F
V5245	Hearing aid, prog, mon, itc	\$1,545.28	\$1,545.28	0	0%	0%	0%	9	9	9	9	9	9			F
V5246	Hearing aid, prog, mon, ite	\$1,545.28	\$1,545.28	0	0%	0%	0%	9	9	9	9	9	9			F
V5247	Hearing aid, prog, mon, bte	\$1,274.18	\$1,274.18	0	0%	0%	0%	9	9	9	9	9	9			F
V5248	Hearing aid, binaural, cic	\$2,519.16	\$2,519.16	0	0%	0%	0%	9	9	9	9	9	9			F
V5249	Hearing aid, binaural, itc	\$1,885.20	\$1,885.20	0	0%	0%	0%	9	9	9	9	9	9			F
V5250	Hearing aid, prog, bin, cic	\$4,308.44	\$4,308.44	0	0%	0%	0%	9	9	9	9	9	9			F
V5251	Hearing aid, prog, bin, itc	\$3,090.56	\$3,090.56	0	0%	0%	0%	9	9	9	9	9	9			F
V5252	Hearing aid, prog, bin, ite	\$3,090.56	\$3,090.56	0	0%	0%	0%	9	9	9	9	9	9			F
V5253	Hearing aid, prog, bin, bte	\$2,548.36	\$2,548.36	0	0%	0%	0%	9	9	9	9	9	9			F
V5254	Hearing id, digit, mon, cic	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5255	Hearing aid, digit, mon, itc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5256	Hearing aid, digit, mon, ite	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5257	Hearing aid, digit, mon, bte	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5258	Hearing aid, digit, bin, cic	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5259	Hearing aid, digit, bin, itc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5260	Hearing aid, digit, bin, ite	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5261	Hearing aid, digit, bin, bte	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5262	Hearing aid, disp, monaural	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5263	Hearing aid, disp, binaural	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5264	Ear mold/insert	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5265	Ear mold/insert, disp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5266	Battery for hearing device	\$1.04	\$1.04	0	0%	0%	0%	9	9	9	9	9	9			F
V5267	Hearing aid supply/accessory	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V5268	ALD Telephone Amplifier	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5269	Alerting device, any type	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5270	ALD, TV amplifier, any type	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5271	ALD, TV caption decoder	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5272	Tdd	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5273	ALD for cochlear implant	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5274	ALD unspecified	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5275	Ear impression	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5298	Hearing aid noc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9			X
V5299	Hearing service	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0			X
V5336	Repair communication device	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9			N
V5362	Speech screening	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N
V5363	Language screening	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective July 1, 2004

		DOLLAR VALUE		MODIFIERS												
HCPCS CPT ^(c) CODE	ABBREVIATED DESCRIPTION	NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ
V5364	Dysphagia screening	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0			N